

FOREST CITY BOROUGH

Employment Application

535 Main Street, Forest City, PA 18421
 Ph: (570)785-3326 Fax: (570)785-9595
 Email: fcboro@nep.net

APPLICANT INFORMATION												
Last Name			First			M.I.		Date				
Street Address					Apartment/Unit #							
City			State			ZIP						
Phone			E-mail Address									
Date Available		Cell Phone			Desired Salary							
Position Applied for												
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for this company?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain					
Driver's License # _____ State _____ Exp. Date: _____												
EDUCATION												
High School			Address									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
College			Address									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
Other			Address									
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree					
REFERENCES												
<i>Please list three professional references.</i>												
Full Name			Relationship									
Company			Phone									
Address												
Full Name			Relationship									
Company			Phone									
Address												
Full Name			Relationship									
Company			Phone									
Address												

PREVIOUS EMPLOYMENT

Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				
Company					Phone				
Address					Supervisor				
Job Title				Starting Salary	\$			Ending Salary	\$
Responsibilities									
From		To		Reason for Leaving					
May we contact your previous supervisor for a reference?				YES <input type="checkbox"/>	NO <input type="checkbox"/>				

MILITARY SERVICE

Branch					From		To	
Rank at Discharge					Type of Discharge			
If other than honorable, explain								

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I authorize the Borough to perform a criminal background check and Verification of my Driver's License.

Signature					Date				
-----------	--	--	--	--	------	--	--	--	--