Borough of Dunlevy

2 Walnut Street, P. O. Box 18

Dunlevy, PA 15432-0018

724 483-3672

Email: dunlevyboro@gmail.com

Website: [www.dunlevyboro.com](http://www.dunlevyboro.com)

APPLICATION FOR EMPLOYMENT: EQUAL OPPORTUNITY EMPLOYER

I, the undersigned, do hereby apply for employment for the position of Laborer for the Borough of Dunlevy. This position is typically seasonal.

Please initial the following:

\_\_\_\_ I am able to work and do physical labor which may require lifting 80 (eighty)

 pounds.

\_\_\_\_ I am able to work irregular hours.

\_\_\_\_ I hold a valid Pennsylvania Driver’s License, which is not under suspension or

 revocation. If under suspension –why\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_ I authorize the Borough of Dunlevy to investigate my Motor Vehicle records.

\_\_\_\_ I authorize the Borough of Dunlevy to investigate my criminal history and background records from the state police.

\_\_\_\_ I understand and agree that if I falsify any data on this application for employment, the Borough of Dunlevy may justifiably terminate my employment.

Please list any job experience that you have that would pertain to this type of employment: Include the Employer name, address and dates worked there:

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
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Please list (2) references that we may contact: (Name and telephone number)

* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please print your name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Telephone number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Have you ever been convicted of a felony\_\_\_\_\_\_\_\_\_**

**Signature required:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mail or email this application to above address(s).**