

## Municipality of Monroeville

## Application for Employment

Monroeville is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color, religion, national origin, ancestry, sex, disabilities or age (40 and over). Reasonable accommodations for the needs of otherwise qualified applicants with disabilities will be made upon request. All information requested on this application form is solicited for the purpose of determining abilities and skills required for proper job placement and to facilitate verification of the information requested.

Instructions: This application must be completed in its entirety. All information is subject to verification. Any omissions or erroneous statements may be cause for rejection of this application, removal from eligibility, or discharge from the Municipality. Please print in ink or type. If, because of a disability, you need assistance completing this application, please notify the Director of HR, (412) 856-3306.

you need	assistance comple	ting this application, p	olease notify the Direc	tor of HR, (412) 85	6-3306.
		Applicant Inform	ation		
Position applied for:			☐ Full-Time	☐ Part-Time ☐	Seasonal
Name: Last		First		Middle	
Address:		City	State	Zip	
Length of Residence:		E-mail:			
Cell Phone: ( )			Home Phone: (	)	
Applicants for Full-Time P	ublic Works, Police	/Fire Civil Service Only	<u>r</u> :		
Driver's License Numb	oer:		State:		
Are you at least 18 year				☐ Yes ☐ Yes	□ No
Are you a United State (Proof of citizenship or a				☐ Yes	☐ No
Have you ever been er	mployed by Monr	oeville?		☐ Yes	☐ No
Dates:	_ Department:	Posi	ition:		
Have you ever filed a p	☐ Yes	☐ No			
If yes, give date and pos	sition applied for: _				
May we contact your of the second of the sec	☐ Yes	☐ No			
employer whom we may contact. Name: Phone Number			er:		
Can you work:	Eve	nings?		☐ Yes	□ No
	Nig	hts?		☐ Yes	☐ No
	Wee	ekends?		□ Y <sub>0</sub> s	□ No

Last High School Attended: Name:		Highest grade completed: (circle one)		Do you have a High School Diploma or G.E.D. certificate?		
Location:		9 10 11	12	☐ Yes ☐ No		
Colleges, universities, trade or technical schools or apprenticeship programs:					is:	
Name		Location	Number of years/months attended		Degree, credits, certificates or licenses earned	
Military						
Branch of Service:		Length of Service:		Rank at Separation:		
Reserve Requirements:		Specializ		ized Training:		
Discharge Hono	orable	Dishonoral	ole	Medical	Other(Specify)	
Other Qualifications						
		Other Qua	<u>alifications</u>	S		
Describe the types of equi operating (machines, vehic		ou are capable of		trade, profession	onal or skills certificates	
		ou are capable of	List any	trade, profession	onal or skills certificates	
	cles, cor	rou are capable of mputers, etc.).	List any you hold	trade, profession.		
operating (machines, vehic	cles, cor	rou are capable of mputers, etc.).	List any you hold	trade, profession.		
operating (machines, vehic	cles, cor	rou are capable of mputers, etc.).	List any you hold	trade, profession.		
operating (machines, vehices) Summarize special skills	cles, con	rou are capable of mputers, etc.). es or experiences w	List any you hold	trade, profession.		
Operating (machines, vehices) Summarize special skills,	, abilitie	es or experiences we Backgrou	List any you hold hich qual	trade, profession.		
operating (machines, vehices) Summarize special skills	, abilitie	es or experiences we Backgrou	List any you hold hich qual	trade, profession.		
Summarize special skills,  POLICE OFFICER APPLIC Have you ever been convice	cles, con , abilitie cants <u>c</u>	es or experiences we Backgrou	List any you hold hich qual	trade, profession.	position.	
POLICE OFFICER APPLIC Have you ever been convictly yes, explain: ALL OTHER APPLICANTS Have you ever been conviction.	cles, con , abilitie can abilitie can abilitie	Backgrou ONLY: crime other than a tother continuation, sale, or manufactors.	List any you hold hich qual raffic viola olving disheture of druger	ify you for this tion?	position.  Yes No  of trust; offenses against threats of violence or use of	

	Er	nployme	ent History			
List all employment for the past ter	n years, beg	inning wi	th current o	most recent position		
Employer:						
Address:						
City: State:				ZIP:		
Supervisor's Name: Sup			Supervisor's Phone Number:			
Position: Ho			How long? From: To:			
Description of Duties:			Reason for Leaving:			
Hourly Rate/Salary: Starting:			E	nding:		
Will this supervisor/employer give a good job reference? If no, explain					☐ Yes	☐ No
Were you: Discharged or asked to resign by this employer? Ever disciplined (given a written warning, suspended, denied a pay increase, etc.) by this employer?					☐ Yes	☐ No
Ever counseled or warned about excessive abseremployer?  If yes to any of the above, please explain			enteeism o	tardiness by this	_ ☐ Yes	□ No
Employer:	•					
Address:						
City:	State:			ZIP:		
Supervisor's Name: Sup			pervisor's Phone Number:			
Position:			How long? From: To:			
Description of Duties:			Reason for Leaving:			
Hourly Rate/Salary: Starting: Ending:						
Will this supervisor/employer give a good job reference? If no, explain			☐ Yes	☐ No		
Were you: Discharged or asked to resign by this employer?  Yes No						□ No
Discharged or asked to resign by this employer?  Ever disciplined (given a written warning, suspended, denied a pay increase, etc.) by this employer?				☐ Yes	□ No	
Ever counseled or warned about excessive absenteeism or tardiness by this employer?			☐ Yes	□ No		
If yes to any of the above, please explain						

If you need additional space, please continue on a separate sheet of paper.

References				
Please list three references other than former employers or relatives				
Name/Address:	Phone Number:	Relationship:		

Please attach a rèsumè, if available.

## **Certification, Authorization and Agreement**

"I certify that the information supplied by me on this application form and in my resume, if any, is true and complete and does not contain any falsifications, omissions, or concealments of material fact. I authorize Monroeville to investigate the truth of this information and of any other information I may supply during a pre-employment interview, I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information Monroeville may solicit from it or them. I further authorize Monroeville to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in a criminal history records report, Monroeville will so advise me.

I hereby release all law enforcement agencies, my former employers, all educational institutions and pro grams, their representatives and agents, and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by Monroeville.

I understand and agree that Monroeville's acceptance of this employment application does not constitute any promise, express or implied, that I will be hired. I further understand that Monroeville does not guarantee anyone employment for any specific length of time. I therefore agree that, if I am hired, my employment may be terminated by either me or by Monroeville at any time without notice or cause.

I further understand and agree that any offer of employment Monroeville may make to me (and, if I am hired, my continued employment) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and may be contingent on my taking and passing a pre-employment substance abuse screen and a pre-employment health examination. I understand that failure to pass required substance abuse screens or health examinations may result in withdraw of offer. In addition, I understand and agree that any changes in the information on my application which may occur during employment will be reported by me within 48 hours to the Municipality.

I certify that I am not a party to any contract or other obligation which would limit, interfere with or restrict my ability to work for Monroeville in any way.

I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form."

Signature of Applicant:	Date:

Monroeville, PA 2700 Monroeville Blvd Monroeville, PA 15146 (412) 856-1000

Revised 01/15/2017