BOROUGH OF SAXONBURG

420 West Main Street Saxonburg, PA 16056 Phone: 724-352-1400 Fax: 724-352-8820 www.saxonburgpa.com



This Borough/Authority is an equal opportunity employer. In all our employment practices, including hiring, we are firmly committed to equal opportunity without regard to race, religion, color, sex, age, national origin, citizenship, disability or any other basis of discrimination prohibited by applicable local, state or federal law. No question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on such grounds.

ANSWER ALL QUESTIONS. INCOMPLETE APPLICATIONS WILL BE REJECTED

Name:							
Street Address:							
City	State	Zip		-			
Telephone ()			8 or older? (
Were you known to any em If Yes, indicate other name:	ployer, school or	• reference	by another r	name? () Yes (
Position for which you are ap	plying:					 	
What wage/salary do you ex If hired, when could you start	xpect? \$ work?		per			 _	
Are you willing to travel? (Would you be willing to rele If Yes, preference:	ocate? () Yes	() No	_	-			
Have you ever been employed If Yes, when and where?		-				 	
Who referred you to this Bo	orough/Authority	y for emplo	oyment?			 	
Names of friends or relative relationship):						t name(s) and	d

AVAILABILITY:

How many hours per week are you available for work? _____ LIST TIMES BELOW

Day of Week	From	То
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Are there any	hours,	shifts or	days	you	cannot	or	will not	work?	()	Yes	() No
If Yes, when	:		•	•								

How far do you live from this location? ______ Do you have transportation to work? () Yes () No Are you currently on Layoff Status, Leave of Absence or other Suspension of Employment and subject to recall with another employer? () Yes () No If Yes, provide details: ______

Have you ever been discharged (or terminated) by a former employer? () Yes () No If Yes, explain:

CERTAIN POSITIONS WITHIN BOROUGH OF SAXONBURG/SAXONBURG AREA AUTHORITY REQUIRE USE OF A CAR OR OTHER MOTORIZED VEHICLE. IF USE OF SUCH A VEHICLE WERE REQUIRED IN THE JOB FOR WHICH YOU ARE APPLYING......

Do you have a valid Driver's License? () Yes () No If No, can you obtain one? () Yes () No Do you have access to a car or other motorized vehicle? () Yes () No Do you or can you get liability insurance on such a vehicle? () Yes () No

YOUR DRIVING RECORD WILL BE CHECKED IF YOU DRIVE A BOROUGH/AUTHORITY VEHICLE.

EDUCATION:

High School			Address _		
City		State Zip		Last grade completed	
Did you graduate? () Yes () No	Still Enrolled? () Yes () No		
Trade or College			 Address		
City	State	Zip	Last	grade completed	
Course/Major		Degree(s) or Cert	tification(s)		
Did you graduate? () Yes () No	Still Enrolled? () Yes () No		

EMPLOYMENT HISTORY: (start with most recent employer)

Company			
Address			
City	_State _	Telephone	_Job Title
		_ Dates Worked: From To	
		May we contact this employer? () Yes	
Reason for leaving			
Company			
Address			
City	_ State	Telephone	_ Job Title
		_ Dates Worked: From To	
		May we contact this employer? () Yes	
Reason for leaving			
Company			
Address			
City	_ State	Telephone	_Job Title
Salary / Wage per _		_ Dates Worked: From To	
Still Employed? () Yes () No	May we contact this employer? () Yes	() No Supervisor
Reason for leaving			
		HAVE YOU EVER BEEN CONVICTED (CLUDING MISDEMEANORS AND TRA	
* A conviction will not neces	ssarily b	oar you from employment. Also, see appli <u>MILITARY SERVICE:</u>	cable state restrictions below.
Branch Do you have service-related skill If Yes, describe:	s applica	Date [Entered Dischar] ble to civilian employment? ()Yes ()No	ged
List additional training or e		DDITIONAL INFORMATION: (all applica	unts)

AGREEMENT

PLEASE READ THE FOLLOWING CAREFULLY AND SIGN IN THE SPACE PROVIDED:

I hereby certify that I have read and fully completed this application and that the facts set forth in this employment application (and accompanying resume, if any) are true and correct to the best of my knowledge, and I agree and understand that any misrepresentation or falsification of information or omission of information during the employment application process may disqualify me from further consideration for employment and, if employed, will subject me to dismissal. I further certify that I am a true and bona fide job applicant, honestly interested in working in the position(s) for which I have applied, and am seeking employment with this Borough/Authority solely to provide me with the benefits of a job and for no other purpose.

I understand that in connection with my application for employment an inquiry into my background may include an investigative consumer report, which provides applicable information concerning character, general reputation, personal characteristics and standard of living. I understand that I have the right to make a written request within a reasonable period of time for information as to the nature and scope of any such report. If I am denied a job based either wholly or in part because of information contained in an investigative consumer report, I will be provided the name and address of the reporting agency that supplies the information.

I acknowledge that Borough of Saxonburg/Saxonburg Area Authority reserves the right to modify or amend its policies at any time, without prior notice. These policies do not create any promises or contractual obligations between this Borough/Authority and its employees. At this Borough/Authority, my employment is at will. This means I am free to terminate my employment at any time, for any reason, with or without cause, and this Borough/Authority retains the same rights. I further understand and agree that the President/Chairman of this Borough/Authority is the only person who may make an exception to this, including the at-will status of my employment, and it must be in writing and duly executed by the President/Chairman of this Borough/Authority.

AUTHORIZATION TO RELEASE INFORMATION: I authorize the references and/or employers listed on this application to give you any and all information concerning my previous employment and pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing such information to you. I agree and understand that Borough of Saxonburg/Saxonburg Area Authority and its agents may investigate or seek information concerning my background and/or previous employment, whether of record or not. I further agree and understand that if employed, Borough of Saxonburg/Saxonburg Area Authority may at any time seek any information from whatever source, which in its discretion, it deems relevant to my employment.

NO DRUG USE POLICY: This Borough/Authority does not hire persons who use illegal drugs. All persons seeking employment or employed with this Borough/Authority may be required to take and pass a screen for illegal drugs, and may be subject to periodic tests for illegal drugs. I hereby voluntarily consent to provide a urine specimen (or blood specimen as required for alcohol testing only) at a collection facility designated by Borough of Saxonburg/Saxonburg Area Authority, and further consent to have the specimen tested at a laboratory selected by Borough of Saxonburg/Saxonburg Area Authority. I hereby certify that I () do () do not use illegal drugs.

Signature I	Date
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