

Strasburg Borough  
APPLICATION FOR EMPLOYMENT  
An equal opportunity employer

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

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LAST NAME                      FIRST                      MIDDLE INITIAL

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PRESENT ADDRESS (STREET, CITY, STATE, ZIP)

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TELEPHONE NUMBER (DAY)                                      (EVENING)

POSITION OR TYPE OF WORK FOR WHICH YOU ARE APPLYING:

PLEASE CHECK PREFERRED STATUS:

Full-time               Part-time               No Preference               Other: \_\_\_\_\_

DATE AVAILABLE TO START:

Are you over the age of 18?  yes               no If no, state your age:

Are you willing to work overtime, if necessary?  yes               no

Can you perform the essential duties of the job for which you are applying, with or without reasonable accommodation?  yes               no

Have you ever been convicted of a felony or misdemeanor crime or are there presently any pending charges against you for any crime other than a minor traffic offense? If yes, state the nature of the offense, date, city and state:

*Disclosure of a criminal record will not necessarily disqualify you for employment consideration. Each offense will be evaluated on its own merit with consideration for job duties which you will be performing.*

During the past ten years have you even been involved in any work-related incident(s) which caused damage to facilities, equipment, property, or other persons?  yes               no

Do you have a legal right to work in the United States?  yes               no

**RECORD OF PREVIOUS EMPLOYMENT**

(PROVIDE INFORMATION ON THE PREVIOUS 10 YEARS OF EMPLOYMENT, INCLUDE MILITARY SERVICE)

PRESENT OR MOST RECENT EMPLOYER		MONTH & YEAR	POSITION HELD & DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending Salary	Reason for leaving:
Supervisor	Telephone No. ( )		

**DOES YOUR PRESENT EMPLOYER KNOW YOU ARE SEEKING EMPLOYMENT ELSEWHERE? \_\_\_YES \_\_\_NO**

PREVIOUS EMPLOYER		MONTH & YEAR	POSITION HELD & DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending Salary	Reason for leaving:
Supervisor	Telephone No. ( )		

NEXT PREVIOUS EMPLOYER		MONTH & YEAR	POSITION HELD & DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending Salary	Reason for leaving:
Supervisor	Telephone No. ( )		

NEXT PREVIOUS EMPLOYER		MONTH & YEAR	POSITION HELD & DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending Salary	Reason for leaving:
Supervisor	Telephone No. ( )		

NEXT PREVIOUS EMPLOYER		MONTH & YEAR	POSITION HELD & DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending Salary	Reason for leaving:
Supervisor	Telephone No. ( )		

If you are applying for an administrative support position, indicate:	
Typing speed:	Computer operation: ___yes ___no Kind:
Shorthand Speed:	Word processing: ___yes ___no Kind:
Dictaphone ___yes ___no	Database: ___yes ___no Kind:
	Spreadsheet: ___yes ___no Kind:

List specialized training courses or on-the-job training you have received:			
What type?	Who provided training?	Dates of training?	Location?

## Education

	Elementary School	High School	Undergraduate College/University	Graduate/ Professional
School Name and Location				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills and extra-curricular activities				
Describe any honors you have received				
State any additional information you feel may be helpful to us in considering your application				

Indicate any foreign languages you can speak, read and/or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

<p>List professional trade, business or civic activities and offices held. You may exclude membership which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:</p>
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## References

<p>Give name, address and telephone number of three references who are not related to you and are not previous employers.</p> <p>1.</p> <p>2.</p> <p>3.</p>
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Have you ever had any job-related training in the United States military?  Yes  No

If Yes, please describe

Are you physically or otherwise unable to perform the duties of the job for which you are applying?  Yes  No

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

# **Applicant's Statement**

AGREEMENT (Please read, sign and date below)

1. If I work for the Borough of Strasburg, Lancaster County, Pennsylvania (hereinafter "Borough"), I agree that I will be an at-will employee, which means that either I or the Borough may end my employment at any time, with or without cause or notice. I agree that no written materials or verbal statements by or on behalf of the Borough will constitute an express or implied contract of employment.
2. I am not a current user of illegal drugs and I agree that I will not work under the influence of illegal drugs or alcohol.
3. There is nothing in my background that would cause a risk to the Borough, its officers, employees or property.
4. The information I have given on this application is true and complete. I agree that any false information or omission allows the Borough to refuse to hire me, or to terminate my employment.
5. I authorize investigation of my personal character and employment record. I hereby authorize any person or organization having information regarding my personal character or employment history to disclose any and all such information to the Borough. Intending to be legally bound, I hereby release the Borough and all persons who provide any such information to the Borough from any liability.
6. I understand that, as required by federal law, I may be required, if hired, to furnish documentation establishing my identity and eligibility to work.
7. I understand that, if hired, I am required to abide by all rules and regulations of the Borough.
8. This application shall be considered active for a period of time not to exceed 45 days. I understand that, should I desire to be considered for employment beyond this time period, I should inquire as to whether applications are being accepted at that time.

Date

\_\_\_\_\_  
Signature of Applicant

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, discharge from employment. I authorize the employer to verify and investigate, at its discretion, the information contained herein and make such further investigation as it deems proper with respect to my employment history, work habits, job performance, and educational background, whether same is of written record or not; and I authorize my employers to furnish such information, and release them from any damage on account of furnishing such information. If hired, I agree to arbitrate any and all claims, dispute or controversies relating to my employment. I agree that a photocopy of this signed application shall have the effect of an original.

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(Date)

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(Applicant's Signature)

cc: Employee Personnel File

**JOB APPLICATION/DRUG/ALCOHOL TEST CONSENT**

I, \_\_\_\_\_, understand that the Strasburg Borough Drug and Alcohol Policy for Employees with Commercial Drivers' Licenses ("CDL") requires that all job applicants or new employees for positions requiring a CDL will be tested, and that the Borough of Strasburg may request a test randomly and for "cause" for the presence of alcohol/drugs in my body. I acknowledge that a confirmed positive test may cause me to be not hired or to be removed from the payroll and subject to discipline and up to and including discharge or with a recommendation to attend a drug and/or alcohol rehabilitation program. I fully understand that if I should refuse to take the test I will not be hired or could be suspended from my job without pay or terminated for insubordination. I also understand that the test results will be kept in confidence and handled by authorized Borough of Strasburg personnel.

I hereby consent ( )                      Or refuse ( )      To take the drug/alcohol test.

I acknowledge that this document (or any accompanying document executed or delivered pursuant to or in connection with the Policy) is not intended to confer any contractual or other rights or claims in my favor and that (if hired) I will be employed at-will.

DATE: \_\_\_\_\_                      \_\_\_\_\_  
Applicant

DATE: \_\_\_\_\_                      \_\_\_\_\_  
Witness



**RECORDS CHECK AUTHORIZATION**

As an applicant for a position with the Borough of Strasburg, I understand the need to investigate my background with particular reference to my driving and criminal history records. I hereby authorize the Strasburg Borough Police Department to check my driving and criminal history records and authorize the release of any pertinent information to the Strasburg Borough Office's representative.

With my consent to release this information, I hereby release the Strasburg Borough Police Department from any liability or damage that may result from furnishing this information.

Applicant's Name: \_\_\_\_\_

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

\_\_\_\_\_

Phone Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Social Security No. \_\_\_\_\_

Drivers License No. \_\_\_\_\_

Signature: \_\_\_\_\_

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

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview \_\_\_ Yes \_\_\_ No

Remarks

Employed \_\_\_ Yes \_\_\_ No Date of Employment

Job Title \_\_\_\_\_ Hourly Rate/Salary \_\_\_\_\_ Department

By:

NAME AND TITLE

DATE

**NOTES**