

BOROUGH OF COPLAY
Municipal Building
98 South 4th Street
Coplay, PA 18037

APPLICATION FOR EMPLOYMENT

Date _____

(Please use ink and print clearly)

Application of _____
Social Security Number _____
Application cannot be processed without this number!

My permanent address is _____
NUMBER STREET
CITY STATE ZIP CODE
TELEPHONE NUMBER (PLEASE INCLUDE AREA CODE) EMAIL ADDRESS
MUNICIPALITY (if applicable) SCHOOL DISTRICT COUNTY

My present address is _____
NUMBER STREET
CITY STATE ZIP CODE
TELEPHONE NUMBER (PLEASE INCLUDE AREA CODE) EMAIL ADDRESS
MUNICIPALITY (if applicable) SCHOOL DISTRICT COUNTY

EMPLOYMENT DESIRED

Position: _____ Date available _____ Salary desired _____

Are you employed now? _____ If so may we contact your present employer? _____

Have you ever applied to this company before? _____ Where? _____ When? _____

PERSONAL INFORMATION

The immigration Reform and Control Act of 1986 requires all employment candidates to verify their employment eligibility by showing legal documents to prove their identity and their right to work.

Are you a US Citizen? Yes No
If no, do you possess a visa? Yes No
If yes, visa type? Permanent Resident Number _____
Student Number _____
Are any relatives employed by the Borough or serve on Council? Yes No

If yes, list name, relationship, location and job: _____

Date of Birth _____ Status: Married Single Widowed Divorced

U.S. MILITARY SERVICE:

Were you in the U.S. Military Service?

Yes No

Active Duty from _____ to _____

Branch _____ Rank _____

Reserve Duty from _____ to _____
Including ROTC

EDUCATION:

Check your highest level of Education

- | | |
|-------------------------------------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Less than 12 years | <input type="checkbox"/> Associate Degree |
| <input type="checkbox"/> High School Diploma or GED | <input type="checkbox"/> Bachelor's Degree |
| <input type="checkbox"/> Beyond High School but NO
College (business/trade etc.) | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Some College, No Degree | <input type="checkbox"/> Doctorate |

SCHOOL NAME & ADDRESS Please submit college transcripts	Type of Degree AA,BS,ETC	Course of Study (Major)	Dates Attended (month/year)		Date Graduated (month/year)
			From	To	
High School					
Vo-Tech/ Trade School					
College					
Graduate School					

CERTIFICATES AND LICENSES

List professional/occupational licenses and certifications: _____

EMPLOYMENT

Are you currently employed? Yes No

List employment, education and unemployment for at least the past five years; use a separate sheet of paper if needed.

Name of Employer	Home Office Address (Street address, City, State, Zip Code)	Dates Employed	Position/ Salary	Name of Immediate Supervisor	Reason for Leaving

In case of

Emergency Notify:

NAME ADDRESS PHONE #

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION. I UNDERSTAND THAT MISREPRESENTATION OR OMISSION OF FACTS CALLED FOR IS CAUSE FOR DISMISSAL. FURTHER, I UNDERSTAND AND AGREE THAT MY EMPLOYMENT IS FOR NO DEFINATE PERIOD AND MAY, REGARDLESS OF THE DATE OF PAYMENT OF MY WAGES AND SALARY, BE TERMINATED AT ANY TIME WITHOUT PREVIOUS NOTICE.

SIGNATURE: _____

DATE: _____