BOROUGH OF CARLISLE

"Committed To Excellence In Community Service"

EMPLOYMENT APPLICATION

The Borough of Carlisle is dedicated to providing a diverse work environment and is proud to be an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to actual or perceived race, color, religious creed, ancestry, national origin, disability, sexual orientation, gender identity or gender expression.

Position You Are Applying For:			Desired Pay (optional):				
Date Available to Work: App	lying For:	\square FT	\square PT	\square Seasonal	Hrs. Per Week:		
GENERAL INFORMATION							
First Name:	Last Name:			Email Address:			
Address (Street, Apt. #, City, State, Zip):				Phon	e Number:		
Do you live within in the Borough of Carlisle? How did yo ☐ Yes ☐ No				hear about this	s job?		
Are you legally eligible to be employed in the U.S.? \Box Yes \Box No (Proof of identity and eligibility are required upon employment.)							
Have you ever worked for the Borough of Carlisle? If yes, provide Position, Dates Employed, Supervisor's Name, and Reason for Leaving:							
Do you have a valid Pennsylvania					•		
Can you perform the essential functions of the position for which you are applying? \square Yes \square No If no, please explain. If you have any question as to what functions are applicable to the position for which you are applying, please ask Human Resources before you answer this question.							
EDUCATION							
High School:	City,	State:		Did you grad Year:	uate? □ Yes □ No		
College/University:	City, S	State:		Did you gradu Year:	ate? □ Yes □ No		
Degree/Certification:							
Technical/Other School/Training: Degree/Certification:	City, S	State:		Did you gradı Year:	ıate? □ Yes □ No		
Professional Licenses or Certifications:				Year:			

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MILITARY SERVICE							
Have you ever served	d in the U.S. Armed Forces?	□ Yes	□ No				
			D. J. D. J.				
Branch:	From Date:	To Date:	Rank at Discharge:				
WORK HISTORY							
Please explain employment gaps of 3 months or more.							
Company:		Phone:					
Address/City/State:		Supervis					
Job Title:		From Da	ate: To Date:				
Duties Performed:							
2							
Reason for leaving:							
Company:		Phone:					
Address/City/State:		Supervis	sor				
Job Title:		From Da					
Duties Performed:		1 TOIN Da	ite. 10 bate.				
Duties i ci ioi incu.							
Reason for leaving:							
1100001110110011118.							
Company:		Phone:					
Address/City/State:		Supervis	sor:				
Job Title:		From Da	nte: To Date:				
Duties Performed:							
Reason for leaving:							
1							

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WORK HISTORY						
(continued)						
Company:	Phone:					
Address/City/State:	Supervisor:					
Job Title:	From Date: To Date:					
Duties Performed:						
Reason for leaving:						
Company:	Phone:					
Address/City/State:	Supervisor:					
Job Title:	From Date: To Date:					
Duties Performed:	10 Date.					
Reason for leaving:						
READ AND SIGN						
I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Employment Application can result in disqualification for employment consideration or, if hired, may be grounds for termination. I understand that if I am hired, my employment is for no definite time and may be terminated with or without cause at any time without prior notice.						
Signed:	Date:					

Submit your completed application to Amy Berrier, HR/Risk Management Manager at <u>aberrier@carlislepa.org</u>. You can also mail or drop off your application to Carlisle Borough Hall, 53 W. South St., Carlisle, PA 17013 or Stuart Community Center, 415 Franklin Street, Carlisle, PA 17013. Applications may also be faxed to 717-240-6615.