



**BOROUGH OF MOUNT JOY  
MOUNT JOY BOROUGH AUTHORITY  
APPLICATION FOR EMPLOYMENT**

An equal opportunity employer



LAST NAME

FIRST

MIDDLE INITIAL

PRESENT ADDRESS (STREET, CITY, STATE, ZIP)

PHONE NUMBER (DAY)

(EVENING)

POSITION OR TYPE OF WORK FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

CHECK PREFERRED STATUS:  Full-time  Part-time  Seasonal  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 crime other than a minor traffic offense or are there charges presently pending 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 ever been involved in any work-related incident(s) which caused damage to facilities, equipment, property, or other persons?  yes  no

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

RECORD OF EDUCATION  
(LIST SCHOOLS FROM WHICH YOU OBTAINED A DEGREE OR CERTIFICATION)

SCHOOL NAME	LOCATION	COURSE OF STUDY	DATES	DEGREE/CERT.
High School				
College				
Graduate				

**RECORD OF PREVIOUS EMPLOYMENT**

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

PRESENT EMPLOYER		POSITION(S) AND / OR DUTIES PERFORMED
Name:	From:	
Street Address:	To:	
City, State, Zip:	Starting salary:	
Supervisor:	Ending salary:	
Phone Number:	Reason for leaving:	

DOES YOUR PRESENT EMPLOYER KNOW YOU ARE SEEKING EMPLOYMENT ELSEWHERE? \_\_\_ YES \_\_\_ NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_ YES \_\_\_ NO

PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Ending salary:		
Phone Number:	Reason for leaving:		

NEXT PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Ending salary:		
Phone Number:	Reason for leaving:		

NEXT PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:	From:		
Street Address:	To:		
City, State, Zip:	Starting salary:		
Supervisor:	Ending salary:		
Phone Number:	Reason for leaving:		

NEXT PREVIOUS EMPLOYER		MONTH / YEAR	POSITION(S) HELD AND DUTIES PERFORMED
Name:		From:	
Street Address:		To:	
		Starting salary:	
City, State, Zip:		Ending salary:	Reason for leaving:
Supervisor:	Phone Number:		

If you are applying for a clerical position, indicate:		
Typing speed: _____	Computer operation: Yes: _____ No: _____	Kind:
Word processing:	Yes: _____ No: _____	Kind:
Spreadsheet:	Yes: _____ No: _____	Kind:

If you are applying for a Public Works or Authority (Water/Sewer/Construction Department or Assistant Authority Manager position, indicate:		
Do you possess a Commercial Driver's License (CDL)? ___ yes ___ no		
State:	Operator's number:	Expiration Date:
Has your Driver's License been suspended or revoked in the last 5 years? ___ yes ___ no		
If yes, please explain:		
Please indicate most recent moving violation:		
Date:	Violation:	State of incident:

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

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 Borough/Authority 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. I agree that a photocopy of this signed application shall have the effect of an original.

\_\_\_\_\_ (Date) \_\_\_\_\_ (Applicant's Signature)

**FOR PERSONNEL DEPARTMENT USE ONLY**

Interviewed? \_\_\_ Yes \_\_\_ No      Hired? \_\_\_ Yes \_\_\_ No      Date of Hire: \_\_\_\_\_

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

Remarks: \_\_\_\_\_

\_\_\_\_\_