

# **City of Scranton Employment Application**

The City of Scranton is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, citizenship status, religion, creed, national or ethnic origin, sex, gender identity, sexual orientation, age, physical or mental disability, veteran's status, or genetic information.

Position Applied For		Date of Application
How did you learn about us?		
□City Website	□Friend/Relative	□ Other
□Current Employee	□Employment Agency	Current employee
□ Internet Job Board (specify:		

Personal Information: Incomplete information could disqualify you from further consideration

Last Name	First Name	Midd	lle Name
Address	City	State	Zip Code
Email Address			
Telephone Number (Hon	ne) Telephone Nu	umber (Mobile)	
Driver's License number i	f driving may be required in the job for v State:	which you are applying:	
CDL License number requ	ired if a CDL may be required in the job State:	o for which you are appl	ying:

If you are under 18 years of age, can you provide required proof of your eligibility to work?	$\Box$ Yes $\Box$ No
Have you ever filed an application with us before? If yes, give date:	□Yes □ No
Have you ever been employed with us before? If yes, give dates:	□Yes □No
Are you currently employed?	□Yes □No
May we contact your present employer?	□Yes □No
Are you legally eligible for employment in the United States? <i>Proof of eligibility to work will be required upon employment.</i>	□Yes □No

Can you travel if a job requires it?	□Yes □No
Have you been convicted of a felony or misdemeanor within the last 7 years? <i>Conviction will not necessarily disqualify an applicant from employment.</i>	□Yes □No
If Yes, please explain	
On what date would you be available for work?	
Are you available to work: $\Box$ Full Time $\Box$ Part Time $\Box$ Temporary	
Wage/Salary Desired:	

## **EDUCATION**

	High School	Undergraduate College/University	Graduate/Professional	
School Name and				
Location				
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4 +	
Diploma/Degree				
Course of Study				

Describe any current/active	
professional certifications you have	
received; any specialized training,	
skills, apprenticeships, and extra-	
curricular activities; and/or honors	
you have received.	
State any additional information	
you feel may be helpful to us in	
considering your application.	

Microsoft Office Suite	Internet
Microsoft Word	Google Docs
Microsoft PowerPoint	Community Plus
□ Outlook E-Mail	Finance Plus

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal gender, race, religion, national origin, age, ancestry, handicap or other protected
status.

### REFERENCES

Give name, e-mail address and telephone number of three references who are not related to you a previous employers. Must include at least one (1) professional reference and one (1) personal re	
1	-
2	-
3	-
Have you had any job-related training in the U.S. Military?	

If Yes, please describe\_

#### **EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

#1 - Employer	Dates E	mployed	Work Performed
	То	From	
Address			
Telephone Number(s)		ate/Salary	
	Starting	Final	
Job Title	Superviso	r	
Reason for Leaving			

#2 - Employer	Dates Employed		Work Performed
	То	From	
Address			
Telephone Number(s)	Hourly R	ate/Salary	
	Starting	Final	
Job Title	Superviso	r	
Reason for Leaving			
#3 - Employer	Dates E	mployed	Work Performed

	То	From	
Address			
Telephone Number(s)	Hourly R	late/Salary	
	Starting	Final	
Job Title	Superviso	r	
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

#### **APPLICANT'S STATEMENT**

# READ CAREFULLY BEFORE SIGNING. IF YOU ARE HIRED, THE FOLLOWING BECOMES PART OF YOUR OFFICIAL EMPLOYMENT RECORD AND PERSONNEL FILE.

I certify that the information contained herein is true and complete to the best of my knowledge.

I authorize investigation of all statements contained on this Application for Employment. I hereby authorize The City of Scranton to contact the references listed above, unless otherwise noted. I hereby release the City of Scranton from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on the information contained in this Application.

This Application shall be considered active for a period of time not to exceed 60 days. If I wish to be considered for employment beyond this time period, I understand that I should inquire as to whether or not applications are being accepted at that time.

I understand that all information appearing on this application is subject to verification, and any false or misleading information may result in refusal to hire or, if already hired, the immediate termination of employment. I also understand that I am required to abide by all rules and regulations of The City of Scranton. I further understand that neither The City of Scranton's employment policies nor anything said during the interview process shall constitute a contract of employment for any fixed duration. I understand that any employment that may be offered to me by The City of Scranton will be at-will, unless I am covered by the terms of a collective bargaining agreement that contains other terms and conditions of employment.

Signature of Applicant

Date