



191 Greenbriar Road
 York Springs, Pa 17372
 Office: 717-528-8939
 Fax: 717-528-7986

APPLICATION FOR EMPLOYMENT

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

PLEASE PRINT

POSITION(S) APPLIED FOR	DATE OF APPLICATION
HOW DID YOU LEARN ABOUT US	
_____ ADVERTISEMENT	_____ FRIEND _____ WALK-IN
_____ EMPLOYMENT AGENCY	_____ RELATIVE _____ OTHER _____

LAST NAME	FIRST NAME	MIDDLE NAME
ADDRESS	NUMBER	STREET
	CITY	STATE
		ZIP
TELEPHONE NUMBERS	SOCIAL SECURITY NUMBER	
	DRIVERS LICENSE NUMBER	

BEST TIME TO CONTACT YOU AT HOME IS: _____

IF YOU ARE UNDER 18 YEARS OF AGE, CAN YOU PROVIDE REQUIRED PROOF OF YOUR ELIGIBILITY TO WORK? YES _____ NO _____

HAVE YOU EVER FILED AN APPLICATION WITH US? YES _____ NO _____
 IF YES GIVE DATE _____

HAVE YOU EVER BEEN EMPLOYED WITH US BEFORE? YES _____ NO _____
 IF YES GIVE DATE _____

ARE YOU CURRENTLY EMPLOYED? YES _____ NO _____

MAY WE CONTACT YOUR PRESENT EMPLOYER? YES _____ NO _____

ARE YOU PREVENTED FROM LAWFULLY BECOMING EMPLOYED IN THIS COUNTRY BECAUSE OF VISA OR IMMIGRATION STATUS? YES _____ NO _____

PROOF OF CITIZENSHIP OR IMMIGRATION STATUS WILL BE REQUIRED UPON EMPLOYMENT

ON WHAT DATE WOULD YOU BE AVAILABLE FOR WORK? _____

ARE YOU AVAILABLE TO WORK: _____ FULL TIME _____ PART TIME _____ TEMPORARY

ARE YOU CURRENTLY ON "LAY OFF" STATUS AND SUBJECT TO RECALL? YES _____ NO _____

CAN YOU TRAVEL IF A JOB REQUIRES IT? YES _____ NO _____

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 7 YEARS? YES _____ NO _____

IF YES, PLEASE EXPLAIN

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

EDUCATION

	NAME & ADDRESS OF SCHOOL	COURSE OF STUDY	YEARS COMPLETED	DIPLOMA DEGREE
HIGH SCHOOL				
UNDERGRADUATE COLLEGE				
GRADUATE PROFESSIONAL				
OTHER (SPECIFY)				

DESCRIBE ANY SPECIALIZED TRAINING, APPRENTICESHIP, SKILLS, AND EXTRA-CURRICULAR ACTIVITIES.

LIST PROFESSIONAL, TRADE, BUSINESS OR CIVIC ACTIVITIES AND OFFICES HELD. <i>YOU MAY EXCLUDE ORGANIZATIONS WHICH INDICATE RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, DISABILITIES OR OTHER PROTECTED STATUS.</i>

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, DISABILITIES OR OTHER PROTECTED STATUS.

1	EMPLOYER		DATES EMPLOYED		WORK PERFORMED
			FROM	TO	
ADDRESS					
TELEPHONE NUMBERS			HOURLY RATE/SALARY		
			STARTING	FINAL	
JOB TITLE		SUPERVISOR			
REASON FOR LEAVING					

2	EMPLOYER		DATES EMPLOYED		WORK PERFORMED
			FROM	TO	
ADDRESS					
TELEPHONE NUMBERS			HOURLY RATE/SALARY		
			STARTING	FINAL	
JOB TITLE		SUPERVISOR			
REASON FOR LEAVING					

3	EMPLOYER		DATES EMPLOYED		WORK PERFORMED
			FROM	TO	
ADDRESS					
TELEPHONE NUMBERS			HOURLY RATE/SALARY		
			STARTING	FINAL	
JOB TITLE		SUPERVISOR			
REASON FOR LEAVING					

4	EMPLOYER		DATES EMPLOYED		WORK PERFORMED
			FROM	TO	
ADDRESS					
TELEPHONE NUMBERS			HOURLY RATE/SALARY		
			STARTING	FINAL	
JOB TITLE		SUPERVISOR			
REASON FOR LEAVING					

IF YOU NEED ADDITIONAL SPACE, PLEASE CONTINUE ON A SEPARATE SHEET OF PAPER.

ADDITIONAL INFORMATION

OTHER QUALIFICATIONS

SUMMARIZE SPECIAL JOB-RELATED SKILLS AND QUALIFICATIONS ACQUIRED FROM EMPLOYMENT OR OTHER EXPERIENCE

STATE ANY ADDITIONAL INFORMATION YOU FEEL MAY BE HELPFUL TO US IN CONSIDERING YOUR APPLICATION _____

NOTE TO APPLICANTS: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING

ARE YOU CAPABLE OF PERFORMING IN A REASONABLE MANNER, WITH OR WITHOUT A REASONABLE ACCOMMODATION, THE ACTIVITIES INVOLVED IN THE JOB OR OCCUPATION FOR WHICH YOU HAVE APPLIED? A DESCRIPTION OF THE ACTIVITIES INVOLVED IN SUCH A JOB OR OCCUPATION IS ATTACHED

YES _____

NO _____

REFERENCES

_____	PHONE # _____
(NAME)	

(ADDRESS)	
_____	PHONE # _____
(NAME)	

(ADDRESS)	
_____	PHONE # _____
(NAME)	

(ADDRESS)	
_____	PHONE # _____
(NAME)	

(ADDRESS)	

APPLICANT'S STATEMENT

I CERTIFY THAT ANSWERS GIVEN HEREIN ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED IN THIS APPLICATION FOR EMPLOYMENT AS MAY BE NECESSARY IN ARRIVING AT AN EMPLOYMENT DECISION.

THIS APPLICATION FOR EMPLOYMENT SHALL BE CONSIDERED ACTIVE FOR A PERIOD OF TIME NOT TO EXCEED 45 DAYS. ANY APPLICANT WISHING TO BE CONSIDERED FOR EMPLOYMENT BEYOND THIS TIME PERIOD SHOULD INQUIRE AS TO WHETHER OR NOT APPLICATIONS ARE BEING ACCEPTED AT THAT TIME.

I HEREBY UNDERSTAND AND ACKNOWLEDGE THAT, UNLESS OTHERWISE DEFINED BY APPLICABLE LAW, ANY EMPLOYMENT RELATIONSHIP WITH THIS ORGANIZATION IS OF AN "AT WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND THE EMPLOYER MAY DISCHARGE EMPLOYEE AT ANY TIME WITH OR WITHOUT CAUSE. IT IS FURTHER UNDERSTOOD THAT THIS "AT WILL" EMPLOYMENT RELATIONSHIP MAY NOT BE CHANGED BY ANY WRITTEN DOCUMENT OR BY CONDUCT UNLESS SUCH CHANGE IS SPECIFICALLY ACKNOWLEDGED IN WRITING BY AN AUTHORIZED EXECUTIVE OF THIS ORGANIZATION.

IN THE EVENT OF EMPLOYMENT, I UNDERSTAND THAT FALSE OR MISLEADING INFORMATION GIVEN IN MY APPLICATION OR INTERVIEW(S) MAY RESULT IN DISCHARGE. I UNDERSTAND, ALSO, THAT I AM REQUIRED TO ABIDE BY ALL RULES AND REGULATIONS OF THE EMPLOYER.

SIGNATURE OF APPLICANT

DATE

FOR PERSONNEL DEPARTMENT USE ONLY

ARRANGE INTERVIEW _____ YES _____ NO

REMARKS _____

EMPLOYED _____ YES _____ NO DATE OF EMPLOYMENT _____

JOB TITLE _____ HOURLY
RATE/SALARY _____

BY _____
NAME AND TITLE DATE

NOTES: _____

POSITION(S) APPLIED FOR IS OPEN: _____ YES _____ NO

POSITION(S) CONSIDERED FOR: _____

DATE

NOTES: