

**CITY OF HAZLETON  
APPLICATION FOR EMPLOYMENT**

Position applying for \_\_\_\_\_ Salary expected \_\_\_\_\_

Applicant Name \_\_\_\_\_

Address \_\_\_\_\_

street city state zip  
Telephone Number \_\_\_\_\_ Are you 18 or older \_\_\_\_\_

Is there any name, other than the name stated above, which you have previously used to identify yourself: \_\_\_\_\_

If you are a military veteran, please provide information regarding your military service:

\_\_\_\_\_  
\_\_\_\_\_

***EDUCATION***

Number of years each: Grade \_\_\_\_ High School \_\_\_\_ College \_\_\_\_ Technical/Jr. College \_\_\_\_  
Higher education major \_\_\_\_\_ Dates attended \_\_\_\_\_  
Name and address of the College or Technical school you attended \_\_\_\_\_

***GENERAL INFORMATION***

Health condition \_\_\_\_\_ Hobbies \_\_\_\_\_

***DRIVING AND CRIMINAL BACKGROUND***

Have you ever been in a major auto accident when you were driving? \_\_\_\_\_ (If yes give details on back.)  
Has your driving privilege ever been revoked or suspended? \_\_\_\_\_ If yes, for what reason \_\_\_\_\_

Have you ever been charged with or convicted of a serious misdemeanor or felony? \_\_\_\_\_  
If so what were the charges and disposition? \_\_\_\_\_

***EXPERIENCE***

Experience in the job field being applied for: \_\_\_\_\_

Education in the job field being applied for: \_\_\_\_\_

***REFERENCES***

Name of last two employers:

(1) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Dates of employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Last Salary \_\_\_\_\_

(2) \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Dates of employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_ Last Salary \_\_\_\_\_

Can we contact your present employer? \_\_\_\_\_

***Name two character references***

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

***Emergency Contact***

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

**By signing this application I affirm that all statements made herein are true and I consent to my references being checked and all information given in this application to be verified. I also understand I am subject to a physical and drug test to be administered by a City of Hazleton authorized facility. I hereby give permission to the City of Hazleton to verify my driving and criminal records.**

Date \_\_\_\_\_ Signed \_\_\_\_\_