

Borough of Fountain Hill
941 Long Street
Fountain Hill, PA 18015-2660

APPLICATION FOR EMPLOYMENT

(Print clearly or Type)

NAME: Last		First	Middle	Date of Application:
Street Address:				Phone No. Home:
City, State, Zip				Work:
Have you ever applied for employment with us? Yes _____ No _____ If yes: Month and Year _____				
Position Desired:				Pay Expected:
Apart from absence for religious observance, are you available for full time work? Yes _____ No _____ If not, what hours can you work? _____				Will you work Overtime if asked?
Are you a United States Citizen?			Yes No	When will you be available to begin work:
Are you legally eligible for employment in the United States?			Yes No	
Other special training or skills (languages, machine operation, etc.)				How did you learn of our organization?
Driver's License Number	State	Class	Type	Expiration Date:

School	Name and Location	Course of Study	No. Years Completed	Date of Graduation	Degree or Diploma
High School					
College					
Vocational					
Other					

(Attach Additional sheets if necessary)

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin or handicap.

EMPLOYMENT HISTORY

Please give accurate, complete full-time and part -time employment record. Start with present or most recent employer.

Company Name:	Telephone
Address:	Employed (month and year) From: To:
Supervisor:	Weekly Pay: Start: Last:
Job Title:	Reason for leaving:
Describe Duties:	
May we contact this employer? Yes No	

Company Name:	Telephone:
Address:	Employed (month and year) From: To:
Supervisor:	Weekly Pay: Start: Last:
Job Title:	Reason for leaving:
Describe Duties:	
May we contact this employer? Yes No	

Company Name:	Telephone:
Address:	Employed (month and year) From: To:
Supervisor:	Weekly Pay: Start: Last:
Job Title:	Reason for leaving:
Describe Duties:	
May we contact this employer? Yes No	

Military Service

Have you ever served in the U.S. Military?	Branch of Service:
Date of Discharge:	Type of Discharge:

(Attach copy of DD-214)

Personal References

Please list three personal references that are not related to you and are not former employers.

Name:		
Address:		
City, State, Zip		
Phone Number:	Home:	Work:
How long have you known this person?		

Name:		
Address:		
City, State, Zip		
Phone Number:	Home:	Work:
How long have you known this person?		

Name:		
Address:		
City, State, Zip		
Phone Number:	Home:	Work:
How long have you known this person?		

Have you ever been arrested for any Crime?	Yes	No
If Yes, were you convicted?	Yes	No
What were you Arrested for or Convicted of:		

I swear or affirm that the information contained on this application is true and correct to the best of my knowledge and belief.

Signature

Date

BOROUGH OF FOUNTAIN HILL

WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION

I, _____ (*Name of Applicant*), hereby give the Borough of Fountain Hill the right to make a thorough investigation into my background, previous employment, education, credit history, criminal history, driving record, and references in order to ascertain my suitability for service as a Public Works employee. I release from all liability and claims, any and all persons, companies and corporations (public and private), supplying any information whatsoever, to representatives of the Borough. This includes, and is not limited to, parties which I have entered into a written or oral agreement, which contains a confidentiality clause. I release, indemnify, and hold harmless, the Borough of Fountain Hill, its officials, officers, and employees from and against any and all liability, which might result from conducting such an investigation.

Date: _____

Signature of Applicant

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

COMPLETE SECTION I ONLY. PRINT CLEARLY IN INK. ENCLOSE \$10.00 MONEY ORDER ONLY. PAYABLE TO DEPARTMENT OF PUBLIC WELFARE. DO NOT SEND CASH OR PERSONAL CHECK.

SEND TO CHILDLINE AND ABUSE REGISTRY, DEPARTMENT OF PUBLIC WELFARE, P.O. BOX 8170 HARRISBURG, PA 17105-8170

APPLICATIONS THAT ARE INCOMPLETE ILLEGIBLE OR RECEIVED WITHOUT FEE WILL BE RETURNED UNPROCESSED. IF YOU HAVE QUESTIONS CALL 717-783-6211

CHILDLINE USE ONLY

DATE RECEIVED BY CHILDLINE

SECTION I APPLICANT IDENTIFICATION

IN THIS SPACE PRINT APPLICANTS FULL NAME AND ADDRESS (DO NOT USE INITIALS)

NAME

STREET

CITY STATE
ZIP CODE

SOCIAL SECURITY NUMBER		
AGE	DATE OF BIRTH	DAYTIME PHONE NO.
SEX <input type="checkbox"/> M <input type="checkbox"/> F		COUNTY YOU LIVE IN

PREVIOUS NAMES USED SINCE 1975 (Include Maiden Name, Nicknames, Aliases)

(FIRST, MIDDLE, LAST)

(FIRST, MIDDLE, LAST)

PURPOSE OF CLEARANCE (Check ONE block ONLY)

<input type="checkbox"/> CHILD CARE	<input type="checkbox"/> VOLUNTEERS-A copy of your PROCESSED "Request for Criminal Record" (Form SP4-164) must be attached. Out-of-state residents must also attach a copy of their PROCESSED FBI clearance (Form FID-258).	<input type="checkbox"/> CWEP (Community Work Experience Program Participant)
<input type="checkbox"/> FOSTER CARE		
<input type="checkbox"/> ADOPTION		
<input type="checkbox"/> SCHOOL		

SIGNATURE OF CAO REP _____ CAO PHONE NO _____

PREVIOUS ADDRESSES SINCE 1975 (Attach additional pages if necessary)

- 1.
- 2.
- 3.
- 4.

HOUSEHOLD MEMBERS (List everyone who lived with you at anytime since 1975 to the present).

NAME (First, Middle, Last) Do not use initials.	RELATIONSHIP	PRESENT AGE	SEX
1.			
2.			
3.			
4.			
5.			
6.			

I certify that the above information is accurate and complete to the best of my knowledge and belief and submitted as true and correct under penalty of law (Section 4904 of the Pennsylvania Crimes Code).

Applicants are required to show the Administrator the original document. Administrators are required to keep a copy of this child abuse history record on file. Any person altering the contents of this document may be subject to civil, criminal or administrative action.

APPLICANT'S SIGNATURE _____

DATE _____

DO NOT WRITE IN THIS SECTION - CHILDLINE USE ONLY

SECTION II RESULTS OF HISTORY CHECK

<input type="checkbox"/> APPLICANT IS NOT LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE.	<input type="checkbox"/> APPLICANT IS LISTED IN A REPORT OF CHILD ABUSE OR A REPORT FOR SCHOOL EMPLOYEE (SEE BELOW).
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STATUS OF REPORT	DATE OF INCIDENT	STATUS OF REPORT	DATE OF INCIDENT
1.		3.	
2.		4.	

VERIFIER _____

DATE _____

VERIFIER'S SUPERVISOR _____

DATE _____

SECTION III

VOLUNTARY CERTIFICATION FOR CHILD CARE SERVICES

_____ has requested a certification which includes a clearance of his/her name against the child abuse, school employee, and criminal history reports.

The results of the child abuse and school employee report clearances are listed in Section II on the reverse side. The results of the criminal history reports are listed below. Out-of-state residents must have criminal history clearance from both the Pennsylvania State Police and the FBI. The voluntary certification may be obtained every two years.

It is the responsibility of parents and guardians to review this information to determine the suitability of the applicant as a substitute caregiver.

PENNSYLVANIA CHILD ABUSE HISTORY CLEARANCE

- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred in the last five years.
- Applicant is named as the perpetrator of a "Founded" child abuse or school employee report which occurred over five years ago.
- Applicant is named as the perpetrator of an "Indicated" child abuse or school employee report.
- Applicant is not named as the perpetrator of any child abuse or school employee report contained in the Statewide Central Register.

PENNSYLVANIA STATE POLICE CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This does not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.

FBI CLEARANCE

- Record exists and contains convictions which prohibit hire in a child care position. Report attached.
- Record exists, but convictions do not prohibit hire in a child care position. Report attached.
- Record exists, but no convictions are shown. This may not prohibit hire in a child care position. Report attached.
- No record exists. Report attached.
- No FBI clearance required.

VERIFIER_____
DATE_____
VERIFIER'S SUPERVISOR_____
DATE