

Application for Seasonal Employment- Recreation

Mt. Lebanon is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color, religion, national origin, ancestry, sex, disabilities or age (40 and over). Reasonable accommodations for the needs of otherwise qualified applicants with disabilities will be made upon request. All information requested on this application form is solicited for the purpose of determining abilities and skills required for proper job placement and to facilitate verification of the information requested.

Instructions: This application must be completed in its entirety. All information is subject to verification. Any omissions or erroneous statements may be cause for rejection of this application, removal from eligibility, or discharge from the Municipality. Please print in ink or type. If, because of a disability, you need assistance completing this application, please notify the Personnel Officer (412) 343-3625

need assistance completing this application, please notify the Personnel Officer, (412) 343-3625. Applicant Information									
Position applied for:									
Name: Last		First			Middle				
Address:		C	City		State	е	Zip		
Length of Resi	dence:		E-mail:						
Cell Phone: ()				Home P	hone: ()		
Driver's Licens	se Number:				St	ate:			
Are you at leas	•						☐ Yes	☐ No	
If no, please state your age: If under age 18, parental/legal guardian signature and work papers are required (See page 3)									
Are you legally authorized to work in the United States? (Proof of authorization will be required upon employment.)								☐ No	
Have you ever been employed by Mt. Lebanon? If yes,							☐ Yes	☐ No	
Dates:	Department: Position:								
Do you have friends or relatives working for Mt. Lebanon?								☐ No	
If yes, state name & relationship									
May we contact your current employer? If no, please identify someone familiar with your performance for your current									
employer whom									
If hired will you hold another job or attend school?								☐ No	
Availability									
Work	Monday	Tuesday	Wednesday	Thu	ırsday	Friday	Saturday	Sunday	
Availability									
Date Available to Start Work:									

<u>Education</u>									
Last High School Attended: Name:		Highest grade completed: (circle one)			npleted:	Do you have a High School Diploma or G.E.D. certificate?			
Location:		9	10	11	12	12 ☐ Yes ☐ No			
Colleges, universities, tra	Colleges, universities, trade or technical schools or apprenticeship programs:								
Name		Loca	Location			umber of onths attended	Degree, credits, certificates or licenses earned		
			,						
				Mili	tary				
Branch of Comica.		Long	th of Cor		· · ·	Bonk of Conor	ection.		
Branch of Service:		Length of Service:			i	Rank at Separation:			
Specialized Training:									
			Other	Qua	lification	S			
Describe the types of equipment you are capable of operating (machines, vehicles, computers, etc.). List any trade, professional or skills certificate you hold.						onal or skills certificates			
Summarize special skills, abilities or experiences which qualify you for this position.									
Background Have you ever been convicted of a crime other than a traffic violation? Yes No									
If yes, explain:									
NOTE O : : : : : :			., .						
NOTE: Criminal convictions are not necessarily a bar to employment; all relevant circumstances will be considered.									

Employment History							
List all employment for the past ten years, beginning with current or most recent position.							
Employer:							
Address:							
City:	State:			ZIP:			
Supervisor's Name:			Supervisor's Phone Number:				
Position:	How lor	ng? From:	To:				
Description of Duties:	Reason for Leaving:						
Hourly Rate/Salary: Starting:			Endin	ıg:			
Will this supervisor/employer give If no, explain		☐ Yes	☐ No				
Were you: Discharged or asked to resign by this employer? Ever disciplined (given a written warning, suspended, denied a pay increase, etc.) by this employer? Ever counseled or warned about excessive absenteeism or tardiness by this employer? If yes to any of the above, please explain						□ No □ No □ No	
Employer:							
Address:							
City:	State:			ZIP:			
Supervisor's Name:			sor's Phone				
Position:	How long? From: To:						
Description of Duties:		Reason for					
Hourly Rate/Salary: Starting: Ending:							
Will this supervisor/employer give a good job reference? If no, explain						☐ No	
Were you: Discharged or asked to resign by this employer? Ever disciplined (given a written warning, suspended, denied a pay increase, etc.) by this employer? Ever counseled or warned about excessive absenteeism or tardiness by this employer? If yes to any of the above, please explain						□ No □ No □ No	

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

References Please list three references other than former employers or relatives							
	l Balanca de						
Name/Address:	Phone Number:	Relationship:					
Please attach a rèsumè, if available.							
Certification, Authorization and Agreement							
"I certify that the information supplied by me on this application form and in my resume, if any, is true and complete and does not contain any falsifications, omissions, or concealments of material fact. I authorize Mt. Lebanon to investigate the truth of this information and of any other information I may supply during a preemployment interview, I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information Mt. Lebanon may solicit from it or them. I further authorize Mt. Lebanon to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in a criminal history records report, Mt. Lebanon will so advise me. I hereby release all law enforcement agencies, my former employers, all educational institutions and pro grams, their representatives and agents, and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by Mt. Lebanon. I understand and agree that Mt. Lebanon's acceptance of this employment application does not constitute any promise, express or implied, that I will be hired. I further understand that Mt. Lebanon does not guarantee anyone employment for any specific length of time. I therefore agree that, if I am hired, my employment may be terminated by either me or by Mt. Lebanon at any time without notice or cause, unless changed by a written agreement signed by a duly authorized representative of Mt. Lebanon. I further understand and agree that any offer of employment Mt. Lebanon may make to me (and, if I am hired, my continued employment) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and may be contingent on my passing a pre-employment substance abuse screens or health examinations may result in with							
I certify that I am not a party to any contract or other obligation which would limit, interfere with or restrict my ability to work for Mt. Lebanon in any way.							
I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form."							
Signature of Applicant:	Г	Date:					
For Juvenile's parent or legal guardian consent: I the undersigned, do certify that I am the legal parent or guardian of the applicant above, and that I consent and agree to the terms said therein.							
Parent/Legal Guardian Signature: (required if under 18)	Date:						

RETURN TO:

Mt. Lebanon PA 900 Cedar Boulevard Pittsburgh, PA 15228 (412) 343-3400 Revised 2/26/2014