

Civil Service Application

City of Wilkes-Barre, PA

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

Application for Examination Competitive Class

This blank MUST be carefully and correctly filled out, and the applicant must answer all questions in ink. A line drawn through a blank or ditto mark will not be considered an answer to question. Any Application wherein changes, erasures or interlineations have been made will not be accepted by the Secretary of the Board. The affidavit required hereon must be executed before some person qualified to administer oaths or affirmations. Any false statement made in this application, or in any other papers or blank forms to be filled out and filed in connection therewith will disqualify the applicant for examination, eligibility, or subsequently for appointment.

After this blank is properly and completely filled out and executed, it must be filed with The Office of the City Clerk from whom it was received by the applicant personally, before deadlines set by the Board. Office hours of the City Clerk are between 9:00 A.M. and 4:30 P.M., Monday through Friday.

To the Applicant:

Your signature to this application indicates that you desire to be a competitor, with a view to entering the service of the City of Wilkes-Barre, in the examination scheduled for the position named below.

At the time of filing application you must bring in any discharge papers from any of the military services and any College Diploma or Certificates.

1. What is your full name? _____
Last First MI
2. Where do you reside at present? _____
Number and Street
_____ City Zip Code
3. Telephone Number _____ Social Security No. _____
4. Valid Motor Vehicle Operators Number: _____
State of Issue: _____ Date of Expiration: _____
5. State exactly for what position you are applying _____
What Department? _____
6. Are you a citizen of the United States? _____
7. For **Fire Fighter** applicants: Are you at least eighteen (18) years of age? Yes No
For **Police Officer** applicants: Are you at least twenty-one (21) years of age? Yes No

8. Where, when and for what period have you attended school? _____

High School _____ How long? _____ Graduated? _____

Academy or College _____ How long? _____ Graduated? _____

9. State your employment for the five years prior to filing this application

Date-Mo. & Yr.	Name and Address of Employer	Wage	Position	Reason for Leaving
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From _____

To _____

From _____

To _____

From _____

To _____

From _____

To _____

From _____

To _____

10. State your residence for the five years prior to filing this application.

Year _____ **Residence** _____

Year _____ **Residence** _____

Year _____ **Residence** _____

Year _____ **Residence** _____

Year _____ **Residence** _____

11. In making application state your experience that is appropriate for the position for which you are applying. _____

12. Have you ever been in the employ of the City of Wilkes-Barre? If so, in what position? _____

Give date you commenced work _____ Date of termination _____

13. Have you served in any of the Military Forces of the United States? _____

Give date of discharge. _____

State nature of discharge _____

Have you ever been in the non-military service of the United States? _____

If so, explain _____

14. Have you ever been convicted of any crime? _____ If so, what crime, and when and where convicted? _____

15. Are you currently an illegal drug user? _____

16. Give names and address of three personal references residing in Wilkes-Barre.

Name _____ Address _____

Name _____ Address _____

Name _____ Address _____

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 the deadline for applications for the next examination. 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) _____

(Address and Zip Code) _____

FOR OFFICE USE ONLY

Personally appeared _____, the above applicant, who being duly sworn deposes and says that each of the foregoing statements subscribed by him are true; except such as are made upon information or belief, and as to those he verily believes the same to be true.

Sworn and subscribed before me

this _____ day of _____ A.D. 20_____

Signature of Applicant
(must be made in the presence of the City Clerk)

City Clerk

Application No. _____

Department _____

Date Received _____

Time of Filing _____

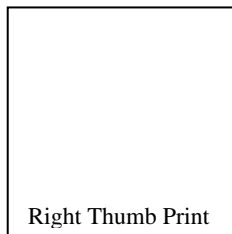
Application for Examination Competitive Class

Name of Applicant

Address: _____

Position _____

Military Service _____



FOR OFFICE USE ONLY

