



**Middlecreek Area Community Center**  
P.O. Box 65, 67 Elm Street  
Beaver Springs, PA 17812  
Phone: 570-658-2276 Fax: 570-658-2777

Applicant Name \_\_\_\_\_  
Home Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email Address \_\_\_\_\_

Current  
Address: \_\_\_\_\_  
Number and street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

How were you referred to Company?: \_\_\_\_\_

### **Positions**

Position(s) applying for: \_\_\_\_\_

### **Are you applying for:**

- Temporary part-time work – such as summer or holiday work?  
[ ] Y or [ ] N
- Regular part-time work?  
[ ] Y or [ ] N

What days and hours are you available for work? \_\_\_\_\_

If applying for temporary work, when will you be available?  
\_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Can you work on the weekends? [ ] Y or [ ] N

Can you work evenings? [ ] Y or [ ] N

**Personal Information:**

Have you ever applied to / worked for Company before? [ ] Y or [ ] N  
If yes, please explain (include date): \_\_\_\_\_

Are you over the age of 18? If under 18, do you have working papers?  
[ ] Y or [ ] N

If hired, would you be able to present evidence of your U.S. citizenship  
or proof of your legal right to work in the United States? [ ] Y or [ ] N

Have you ever been convicted of a crime or have a criminal record?  
[ ] Y or [ ] N

**Education, Training and Experience**

**High School:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

**College / University:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma earned: \_\_\_\_\_

**Vocational School:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, state, zip: \_\_\_\_\_

Number of years completed: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

Degree / diploma? : \_\_\_\_\_

**Additional Information**

Do you have any other experience, training, qualifications, or skills which you feel should be brought to our attention, in the case that they make you especially suited for working with us?

Y or  N

If yes, please explain

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Have you ever been convicted of a crime? If yes, explain.

Yes

No

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## Employment History

Are you currently employed? [ ] Y or [ ] N

If you are currently employed, may we contact your current employer?  
[ ] Y or [ ] N

Below, please describe past and present employment positions, dating back five years. Please account for all periods of unemployment. **Even if you have attached a resume, this section must be completed.**

Name of Employer: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_  
Position &

Duties: \_\_\_\_\_  
Reason for Leaving:

\_\_\_\_\_  
May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_  
Position &

Duties: \_\_\_\_\_  
Reason for Leaving:

\_\_\_\_\_  
May we contact this employer for references? [ ] Y or [ ] N

Name of Employer: \_\_\_\_\_  
Name of Supervisor: \_\_\_\_\_

Telephone Number: \_\_\_\_\_  
Business Type: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_

Length of Employment (Include Dates): \_\_\_\_\_  
Position &

Duties: \_\_\_\_\_  
Reason for Leaving:

May we contact this employer for references? [ ] Y or [ ] N

### References

List below three persons who have knowledge of your work performance within the last four years. Please include professional references only.

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted:

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted:

Name - First, Last: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, state, zip: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Number of Years Acquainted:

**Please Read and Initial Each Paragraph, then Sign Below**

I certify that I have not purposely withheld any information that might adversely affect my chances for hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and ability. I understand that any omission (including any misstatement) of material fact on this application or on any document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company.

\_\_\_\_\_

I understand that if I am employed, my employment is not definite and can be terminated at any time either with or without prior notice, and by either me or the company.

\_\_\_\_\_

I permit the company to examine my references, record of employment, education record, and any other information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & associations from any & all claims, demands or liabilities arising out of or in any way related to such examination or revelation.

\_\_\_\_\_

**Applicant's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_