



Borough of Ambridge  
Application for Employment

Position: \_\_\_\_\_ Date: \_\_\_\_\_

**Applicant Information**

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

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

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Additional Applicant Information**

Are you at least 18 years old?  Yes  No

Are you authorized to work in the United States:  Yes  No

Are you currently employed?  Yes  No

If yes, date available: \_\_\_\_\_

**Education Information**

High School Attended: \_\_\_\_\_

Did you graduate?  Yes  No

College Attended: \_\_\_\_\_

Did you graduate?  Yes  No

Course of Study: \_\_\_\_\_

**Military Service Information**

Branch of Service: \_\_\_\_\_

Length of Service: \_\_\_\_\_

Rank at Separation: \_\_\_\_\_

Discharge Type: \_\_\_\_\_

**Employment Information**

Dates of Employment: \_\_\_\_\_

Employer: \_\_\_\_\_

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

Supervisor's Name / Company Phone: \_\_\_\_\_

Job Title: \_\_\_\_\_

Primary Duties: \_\_\_\_\_

May we contact:  Yes  No

**Dates of Employment:** \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name / Company Phone: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Primary Duties: \_\_\_\_\_  
May we contact:  Yes  No

**Dates of Employment:** \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name / Company Phone: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Primary Duties: \_\_\_\_\_  
May we contact:  Yes  No

**Dates of Employment:** \_\_\_\_\_  
Employer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Supervisor's Name / Company Phone: \_\_\_\_\_  
Job Title: \_\_\_\_\_  
Primary Duties: \_\_\_\_\_  
May we contact:  Yes  No

**Professional References**

Provide the names and phone numbers of three professional references:  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Resume**

As a requirement of some positions, a resume may need to be attached to this employment application.

**Disclaimer and Certification**

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my applications or interview may result in my release.

\_\_\_\_\_  
Applicant Signature Date

The undersigned application (or guardian if under 18 years old) hereby authorizes the Borough of Ambridge Police Department to complete a criminal background report on me, including a driver history report, for the purpose of completing this application for employment with the Borough of Ambridge.

\_\_\_\_\_  
Applicant Name (print) Applicant Signature

\_\_\_\_\_  
Driver License State Driver License Number