

EMPLOYMENT EXPERIENCE

Please start with your present or most recent job.

EMPLOYER (1)	DATES EMPLOYED		WORK PERFORMED	
ADDRESS	FROM	TO		
	Employer's email:			
TELEPHONE				Hours per week
JOB TITLE				Reason for leaving
SUPERVISOR	Supervisor's email:			
EMPLOYER (2)	DATES EMPLOYED		WORK PERFORMED	
ADDRESS	FROM	TO		
	Employer's email:			
TELEPHONE				Hours per week
JOB TITLE				Reason for leaving
SUPERVISOR	Supervisor's email:			
EMPLOYER (3)	DATES EMPLOYED		WORK PERFORMED	
ADDRESS	FROM	TO		
	Employer's email:			
TELEPHONE				Hours per week
JOB TITLE				Reason for leaving
SUPERVISOR	Supervisor's email:			
EMPLOYER (4)	DATES EMPLOYED		WORK PERFORMED	
ADDRESS	FROM	TO		
	Employer's email:			
TELEPHONE				Hours per week
JOB TITLE				Reason for leaving
SUPERVISOR	Supervisor's email:			

EDUCATION

	School Name/Location	Years Completed	Degree Awarded
High School			
Undergraduate/College			
Graduate/Professional			
Describe any specialized training skills and abilities you have acquired from employment, education or other experience (include any foreign language you can speak, read and/or write).			
Describe any honors you have received.			
Do you think you might need any physical assistance, or any physical modifications to building and/or equipment, in order for you to do your job? Yes [] No [] If yes, please describe:			

REFERENCES

Give name, address, and telephone number of three references who are not related to you. Two must be employment related (must be supervisors, not co-workers) and one must be able to verify education.

Name	Company	Address	Telephone
1.			
2.			
3.			

PREVIOUS HOME ADDRESSES

If at any point during the five years immediately preceding this application, you have lived at an address (addresses) other than that listed on page 1 of this application, please show below:

Address (show house/apt #, street, city, state and zip)	From (date)	To (date)

You are required to submit clearances in respect of all states in which you have lived during these five years.

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge and that I am physically able to perform the duties for the job for which I am applying. I understand that, if applicable, employment may be contingent upon successful completion of a physical examination.

I authorize investigation of all statements contained in this application for employment, as well as documentation submitted, as may be necessary in arriving at an employment decision including the following:

- Previous employment
- Previous addresses
- Educational credentials (verification of degree, official transcripts, dates of enrollment) and certificates
- Licenses
- Criminal and FBI background check from Pennsylvania
- Child Abuse clearance
- Criminal and child abuse checks from other states in which you have lived during the previous 5 years
- References
- Driving history

This application for employment shall be considered active for a period not to exceed 60 days. 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 policies, rules and regulations of the Juvenile Justice Center of Philadelphia.

Signature of Applicant
Empapp.doc

Date

01/17