

**Application for Employment**  
**Perry County Council of the Arts**  
PO Box 354, Newport, PA 17074

**ALL POTENTIAL EMPLOYEES ARE EVALUATED WITHOUT REGARD TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, AGE, MARITAL OR VETERAN STATUS, THE PRESENCE OF A NON-JOB RELATED HANDICAP OR ANY OTHER LEGALLY PROTECTED STATUS.**

Name \_\_\_\_\_ Date \_\_\_ / \_\_\_ / \_\_\_

Address \_\_\_\_\_

Phone (H) (\_\_\_\_\_) \_\_\_\_\_ Phone (C) (\_\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_ Available for:  part-time  full-time

Hours Available – Include evenings

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

What date are you available to start work? \_\_\_ / \_\_\_ / \_\_\_

Education:

Name and Address of School - Degree/Diploma - Graduation Date

\_\_\_\_\_  
\_\_\_\_\_

Licenses, Skills (including software), Training, Awards, or things you're really good at

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you been convicted of or pleaded no contest to a felony within the last five years?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**Driving Information**

Driver's license number \_\_\_\_\_ State of issue \_\_\_\_\_

Do you have a vehicle that could be used during work hours? \_\_\_\_\_

Have you had any accidents during the past three years? How many? \_\_\_\_\_

Have you had any moving violations during the past three years? How Many? \_\_\_\_\_

**Employment Information**

Are you eligible to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

**Present Or Last Position:** May We Contact Your Present Employer? Yes \_\_\_\_\_ No \_\_\_\_\_

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

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

Supervisor: \_\_\_\_\_

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

Position Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Salary: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

**Previous Position:**

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

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

Supervisor: \_\_\_\_\_

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

Position Title: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Salary: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

Using the Position Description as a guide, describe how your skills, personality, and talents will fit this position. If you feel comfortable doing so, also add what challenges will be presented.

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

**References** Please include name, relationship, address, and phone of 3 individuals who are not related to you and can speak about your work habits and/or character.

---

---

---

I certify that information contained in this application is true and complete. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_