

255 Alpha Dr., Pittsburgh, PA 15238 (412) 963-0212

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Application for Employment	J			
Position(s) applied for			Date of applica	ation/
Name	First	Middle	Social Security	/ #
Address	HIST	Middle	State	Zip Code
Telephone # ()	Mobile/Other # ()E-n	nail Address	Zip Code
Referral Source (How did yo	ou hear about us?)			
If you are under 18, and it is	s required, can you furnish a wo	ork permit?		🗆 Yes 🗆 No
f no, please explain				
Have you ever been employ	ed here before? If yes , give dat	es and positions		☐ Yes ☐ No
	mployment in this country?			
	/			
	d 🗆 Full-Time 🗆 Part-Tim			
	riving may be required in position			*
	ollowing questions does not con			
	d nature of the violation, rehabi			
	or "no contest" to, or been con			
yes, please provide date(s	s) and details			
Employment History Starting	g with your most recent employer, provi	ide the following informatio	on.	
Employer	Telephone #		Dates employed:	th / Year to Month / Year
Street Address	City	State		pensation (Starting)
Starting Job Title/Final Job Title		May we contract for reference?	☐ Hourly ☐ Salary Commission/Bonus/Other C	\$ per
Immediate Supervisor and Title (for most recent po	osition held)	YesNo		pensation (Final)
	Stories,		☐ Hourly ☐ Salary	\$ per
Why did you leave?	E		Commission/Bonus/Other C	compensation \$
Summarize the type of work performed and job res	ponsibilities			
What did you like most about your position?				
What were the things you liked least about the pos	ition?			
	-			
Employer	Telephone #		Dates employed:	nth / Year to Month / Year
Street Address	City	State	Com	pensation (Starting)
Starting Job Title/Final Job Title		May we contract for reference?	☐ Hourly ☐ Salary	\$ per
Immediate Supervisor and Title (for most recent p	acition bald)	☐ Yes ☐ No	Commission/Bonus/Other C	npensation (Final)
Acceptable of the Control of the Con	osition neig)		☐ Hourly ☐ Salary	\$ per
Why did you leave?			Commission/Bonus/Other	Compensation \$
Summarize the type of work performed and job re	sponsibilities			
What did you like most about your position?				
What were the things you liked least about the po	sition?			
-				
Employer	Telephone #		Mo	onth , Year Month , Year
	·		Dates employed:	/ to /
Street Address	City	State	Com ☐ Hourly ☐ Salary	npensation (Starting) \$ per
Starting Job Title/Final Job Title		May we contract for reference?		
Immediate Supervisor and Title (for most recent	position held)	YesNo	Con	npensation (Final)
Why did you leave?			☐ Hourly ☐ Salary	\$ per
			Commission/Bonus/Other	Compensation \$
Summarize the type of work performed and job r	esponsibilities			
What did you like most about your position?		1	;	

What were the things you liked least about the position?

Sk	kills and Qualifications					
Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.						
Computer Skills (check appropriate boxes. Include software titles and years of						
☐ Word ProcessingY		Years_	🗆 E-mail		_Years	
☐ Spreadsheet		Years_		4	Years	
	☐ Presentation	Years_	Other		Years	
	Educational background Starting with your most recent school attended, provide the following information.					
	School (include city & state)	Years Completed	Completed	GPA Class Rank	Major/ Minor	

□ Degree □ Certification □ Other	
□ Diploma □ GED □ Degree □ Certification □ Other □ Other	
☐ Diploma ☐ GED ☐ Degree ☐ Certification ☐ ☐	

☐ GED

References

List name and telephone number of three business/work references that are not related to you and are not previous supervisors. If not applicable,

Diploma

List three school or personal references that are not related to you.

Name	Title	Relationship To You	Telephone	Number of Years known
				200
		-		

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this Application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporation or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no questions on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant	Date:	 /	4