

**THE BOROUGH OF HANOVER**  
 44 Frederick Street, Hanover, PA 17331  
 717-637-3877

**APPLICATION FOR EMPLOYMENT**  
 (Pre-employment Questionnaire) (An Equal Opportunity Employer)

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

Name: (Last Name First) \_\_\_\_\_

Address: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

What kind of work are you applying for? \_\_\_\_\_

What special qualifications do you have? \_\_\_\_\_

What office machines can you operate? \_\_\_\_\_

Do you have the legal right to work in the United States? \_\_\_\_\_  
 (If you are hired, you may be asked for documentation verifying same.)

**SPECIAL PURPOSE QUESTIONS**

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS FRAMED AREA UNLESS THE EMPLOYER HAS CHECKED A BOX PRECEDING A QUESTION, THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS.

I understand and agree that I may be required to take one or more:  Physical Examination;  Lie detector test(s), as a condition of hiring or continued employment. I agree to consent to take such test(s) at such time as designated by the Company and to release the Company, its directors, officers, agents or employees from any claim arising in connection with the use of such test(s). Yes \_\_\_\_\_ No \_\_\_\_\_

I have been advised that lie detector tests, as a condition of hiring or continued employment, are prohibited by Laws. Yes \_\_\_\_\_ No \_\_\_\_\_

**EDUCATION**

	*NO OF YEARS ATTENDED	NAME OF SCHOOL	CITY	COURSE
GRAMMAR				
HIGH				
COLLEGE				
OTHER				

\* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

I hereby give permission to allow release of my school or work records to The Borough of Hanover. Yes \_\_\_\_\_ No \_\_\_\_\_

Can you perform the tasks of this position without an accommodation? Yes \_\_\_\_\_ No \_\_\_\_\_

If no, please explain \_\_\_\_\_

**EXPERIENCE**

COMPANY NAME & ADDRESS	DATE	LIST YOUR DUTIES	STARTING SALARY	FINAL SALARY

**REFERENCES**

NAME	ADDRESS	PHONE NUMBER	OCCUPATION

This form has been designed to strictly comply with State and Federal fair employment practice laws prohibiting employment discrimination. This Application for Employment form is sold for general use throughout the United States. TOPS assumes no responsibility for the inclusion in said form of any questions which, when asked by the Employer of the Job Applicant, may violate State and/or Federal Law.