



BRIAN K. ZEYBEL
SHERIFF

OFFICE OF THE SHERIFF
WARREN COUNTY, PENNSYLVANIA
407 MARKET STREET
WARREN, PENNSYLVANIA 16365

TELEPHONE
(814) 723-7553
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(814) 726-2113

APPLICATION FOR EMPLOYMENT

NAME: _____
(Last) (First) (Middle)

Have you ever been known by or used any other name? _____ If yes, what name(s)?

Social Security No.: _____ Are you over 21? Yes () No ()

Current Address: _____
(Street Address) (City) (State) (Zip Code) (Phone Number)

How long have you lived at the above address? _____ List addresses you have used during the last seven (7) years: _____

Are you a United States Citizen? Yes () No ()

Drivers License No.: _____ State: _____ Expiration: _____

Have you ever been convicted of any crime, including traffic violations? _____

(Charge) (Arresting Agency) (Date of Arrest)

(Charge) (Arresting Agency) (Date of Arrest)

Have you ever been a member of the United States Armed Forces? _____ If so, what

Branch of Service? _____ From: _____ To: _____

Specialized Training while in the Armed Forces: _____

What type of discharge did you receive? _____

Job or Position applied for: _____

Date of Application: _____

Date available for work: _____

(It is our hope that you will extend your present employer the courtesy of at least two weeks notice prior to leaving)

Are you on a lay-off and subject to recall by another employer? _____

Can you absent yourself from your home and the community for training periods or departmental needs? _____

School	Name & City	Years Attended	Course	Last Year Completed
High School				1 2 3 4
College				1 2 3 4
Other				1 2 3 4

Complete all present and past employment, beginning with the most recent

1. _____

Name and Address of Employer _____ Type of Business _____

From _____ To _____

Dates Employed _____ Starting Title _____ Present or Last Title _____

Name of Supervisor _____ Starting Salary _____ Present or Last Salary _____

Brief Description of Duties _____

Reason for Leaving _____

2. _____

Name and Address of Employer _____ Type of Business _____

From _____ To _____

Dates Employed _____ Starting Title _____ Present or Last Title _____

Name of Supervisor _____ Starting Salary _____ Present or Last Salary _____

Brief Description of Duties _____

Reason for Leaving

3. _____
Name and Address of Employer Type of Business

From _____ To _____
Dates Employed Starting Title Present or Last Title

Name of Supervisor Starting Salary Present or Last Salary

Brief Description of Duties

Reason for Leaving

4. _____
Name and Address of Employer Type of Business

From _____ To _____
Dates Employed Starting Title Present or Last Title

Name of Supervisor Starting Salary Present or Last Salary

Brief Description of Duties

Reason for Leaving

Summarize special skills and qualifications acquired from employment, education and other experience:

List FOUR (4) References (not related to you)

1.	Name	Address	
	Phone Number		Years Known
2.	Name	Address	
	Phone Number		Years Known
3.	Name	Address	
	Phone Number		Years Known
4.	Name	Address	
	Phone Number		Years Known

APPLICANT'S STATEMENT

I certify that the answers given herein are true and complete to the best of my knowledge, information and belief.

I authorize investigation of all statements contained in the application for employment as may be necessary in arriving at an employment decision. I understand that this application is not intended to be a contract for employment.

In the event of employment, I understand that false and misleading information given in my application for interview(s) will result in discharge. I understand also that I am required to abide by all rules and regulations of the Sheriff's Office and I understand that the Sheriff's Office is an at will employer.

Signature of Applicant

Date

Employment Relative Questionnaire

Are you related to anyone who currently works for
Warren County?

Yes _____ No _____

If yes, please list

Who are you related to?

How are you related?
