

Police Athletic League of Wilmington (PALW)



Application for Employment Police Athletic League of Wilmington (PALW)

An Equal Opportunity Employer

Last Name:		First Name:	Middle Initial	D.O.B	Social Security Number
Street Address		City/State	Zip Code	Phone Number	
If hired, can you provide evidence of legal eligibility to work in the U.S.? Yes or No			Any offer of employment is conditional upon completing a I-9 and providing the appropriate documents for identity and work authorization.		
Position Desired:		Wage/Salary Desired:	Full Time?		
			Part Time?		
What date can you begin to work?		Are you 18 years of age or older?		It under 18 years of age, you will be required to submit a birth certificate or work certificate as required by state or federal law.	
Name of high school attended:		City & State	Graduated?	GED?	
Name of college or technical school:		City & State	Graduated?	Degree & Major	
Are you presently enrolled in school?		If yes, give the name & address of school and expected degree date:			
List any job-related skills or accomplishment. Including military services:					
Provide three references who are former or current employers who we may contact:					
Name	Occupation	How do you know them and for how long?	How long have you known them?	Phone number:	

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Your Employment History	List names of employers with present or last employer listed first.	
May we contact your current employers before you are offered a position?		
Yes or No		
Name of Employer	Job Title:	
	Duties:	
Address	Dates of Employment:	
	From:	To:
City, State, ZIP Code	Hourly Pay or Salary:	
	Starting Pay:	
Supervisor:	Ending Pay	
Telephone:	Reason for Leaving:	
Name of Employer	Job Title:	
	Duties:	
Address	Dates of Employment:	
	From:	To:
City, State, ZIP Code	Hourly Pay or Salary:	
	Starting Pay:	
Supervisor:	Ending Pay	
Telephone:	Reason for Leaving:	
Name of Employer	Job Title:	
	Duties:	
Address	Dates of Employment:	
	From:	To:
City, State, ZIP Code	Hourly Pay or Salary:	
	Starting Pay:	
Supervisor:	Ending Pay	
Telephone:	Reason for Leaving:	
CAREFULLY READ EACH STATEMENT BEFORE SIGNING AT THE BOTTOM		
<p>I certify that all of the information provided in this employment application is true and complete to the best of my knowledge, and I authorize investigation of all statements contained in this application, including a criminal background check, credit history check, and drug test, as applicable. I understand that any false or incomplete information may disqualify me from further consideration for employment and may result in my immediate discharge if discovered at a later date.</p> <p>I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer, past employer, and other organizations to provide information concerning my previous employment and other relevant information that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.</p> <p>I have read, understand, and agree to the above statement.</p>		
Signature:	Date:	