

# CENTRAL BLAIR RECREATION & PARK COMMISSION

2101 5<sup>th</sup> Avenue, Altoona, PA 16602

## Personal Information

## APPLICATION FOR EMPLOYMENT

DATE \_\_\_\_\_

This Commission is an equal-opportunity employer. Federal and State laws prohibit discrimination in employment because of race, color, religion, age, sex, or national origin. No question on this application is asked to limit or exclude any applicant's consideration for employment because of his or her race, color, religion, age, sex, or national origin.

Name \_\_\_\_\_ Social Security No. \_\_\_\_\_  
(Last) (First) (Middle initial)

Present Address \_\_\_\_\_  
(No. Street) (city) (state) (zip)

Telephone Number ( ) Cell Number ( ) Sex Male Female

Have you lived at this address more than one year? \_\_\_\_\_ If not, please state previous address:

(No. Street) (City) (State) (Zip)

16 years of age or older? \_\_\_\_\_ 18 years of age or older? \_\_\_\_\_ Age more than 65 years of age? \_\_\_\_\_

E-Mail address \_\_\_\_\_

Position(s) applied for: \_\_\_\_\_

Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Summer \_\_\_\_\_

Were you previously employed by us? \_\_\_\_\_ Position \_\_\_\_\_

Have you ever pleaded guilty or been convicted of a crime other than a misdemeanor or summary offense? Yes \_\_\_\_\_  
No \_\_\_\_\_

Do you have a current/valid PA driver's license? \_\_\_\_\_

Do you have a valid PA Child Abuse Clearance? Yes No Do you have a valid PA State Police Clearance Yes No

Do you have a valid FBI Fingerprint Clearance? Yes No **PLEASE ATTACH ALL CLEARANCES WITH THIS APP.**

If your application is considered favorably, on what date will you be available for work? \_\_\_\_\_

## Education

High School: Grade completed as of June 10, 2026 8th 9th 10th 11th 12th

School \_\_\_\_\_ City \_\_\_\_\_

High School Diploma: Yes \_\_\_\_\_ No \_\_\_\_\_ G.E.D.: Yes \_\_\_\_\_ No \_\_\_\_\_

College: Number of years completed 1 2 3 4

School \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Major \_\_\_\_\_ Degree Earned \_\_\_\_\_

Certificates and/or background information for job applied.

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

OVER

**Employment** - List last employer first. Include U.S. military service.

Date Month and Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____  To _____				
From _____  To _____				
From _____  To _____				
From _____  To _____				

**References** - Give below the names of three persons not related to you, whom you have known at least 1 year.

Name	Address	Business	Phone Number
1.			
2.			
3.			

**Physical Record**

Do you possess any physical disabilities which would prevent you from performing the position sought?    Yes      No

Give details - \_\_\_\_\_

In case of emergency notify \_\_\_\_\_  
(Name) (Address) (Phone number)

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and belief, and hereby grant the Commission permission to verify such answers. I understand that any false statement on this application may be considered as sufficient cause for rejection of this application or for dismissal if such false statement is discovered subsequent to my employment. I understand that as a part of the Commission procedure for processing my employment application, an investigation and a report may be made by a consumer reporting agency in the process of which information may be obtained through interviews with third parties, such as family members, business associates, financial sources, friends, neighbors, or others with whom the applicant has been acquainted. This inquiry may include information as to the applicant's character, general reputation, personal characteristics, whichever may be applicable. I understand that under the Federal Fair Credit Reporting Act, I have the right to make a written request within a reasonable period of time for a complete and accurate disclosure by the Commission of the nature and scope of the investigation requested. If this application for employment is denied either wholly or partly because of information contained in a consumer report from a consumer reporting agency making the report.

\_\_\_\_\_  
Signature