

PERSONNEL DATA SUMMARY

(Please Complete Both Sides)

COMMONWEALTH OF PENNSYLVANIA

DEPARTMENT OF PUBLIC WELFARE

TYPE OR PRINT IN INK (if additional space is needed use 8 1/2 x 11 sheet)

Position Applied For:				Institution CBA or Office:				
Mr. Mrs. Ms.	Last Name	First	Middle	Former Name	Sex	D.O.B.	S.S. #	Phone #
Legal Address Street		City		County	State	Zip	Are you a US Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing Address Street		City		County	State	Zip	How long a resident of PA?	
Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Single <input type="checkbox"/> Separated <input type="checkbox"/> Divorced		Height	Weight	Physical handicap, if any			Do you have PA Drivers License? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Previous or current State employment – Department or agency From: _____ To: _____				Name under which employed			Veterans Credit Claimed <input type="checkbox"/> For self <input type="checkbox"/> From Spouse	
EDUCATIONAL RECORD (Circle highest grade of schooling) 1 – 2 – 3 – 4 – 5 – 6 – 7 – 8 – 9 – 10 – 11 – 12				College (Circle highest grade of schooling) 1 – 2 – 3 – 4 – 5			Post Graduate:	
Name and Location of Educational Institution		Dates Attended	Semester Credits	Date Graduated	Diploma or Degree	Major Subjects or Courses		
High School:								
College or University:								
Graduate or Professional:								
Other Schooling (Specify):								
List by number and year issued, any license, certificate or registration issued by the Commonwealth or professional association which relates to, or is a requirement for the position for which you are applying.								
List any professional organizations to which you belong (do not list any organization that would reveal your race, color, religious creed or national origin).								
List any other training and experience you have that you believe particularly applicable to the type of work for which you are applying.								
List office machines you operate				Typing (WPM)	Dictation (WPM)	Foreign Languages Spoken:		

EMPLOYMENT RECORD: List your complete employment record including periods of unemployment starting with your present position and working backwards

Name and address of employer:	Position Title		Name and Title of Immediate Supervisor	
	Dates of Employment From: _____ To: _____		Annual Salary Start \$ _____ Final \$ _____	
Describe fully your major duties and responsibilities:				
No. Employees Supervised (by position title)			Reason for Leaving:	

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Name and address of employer:	Position Title	Name and Title of Immediate Supervisor	
	Dates of Employment From: To:	Annual Salary Start \$ Final \$	Hours Worked Weekly

Describe fully your major duties and responsibilities:

Employees supervised (by position title)	Reason for leaving:
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Name and address of employer:	Position Title	Name and Title of Immediate Supervisor	
	Dates of Employment From: To:	Annual Salary Start \$ Final \$	Hours Worked Weekly

Describe fully your major duties and responsibilities:

Name and address of employer:	Position Title	Name and Title of Immediate Supervisor	
	Dates of Employment From: To:	Annual Salary Start \$ Final \$	Hours Worked Weekly

Describe fully your major duties and responsibilities:

No. employees Supervised (by position title)	Reason for Leaving:
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Have you ever been refused a bond? No Yes **If yes, explain**

Were you ever convicted of a criminal offense, or have you ever forfeited bond or collateral in connection with a criminal charge? Is any criminal charge against you now pending? (Omit (1) minor traffic violations and (2) any offense committed before your 18th birthday which was finally adjudicated in a juvenile court or under a youth offender law). **If "yes", give details on a separate sheet of paper.**

NO YES

Conviction of a criminal offense is not a bar to employment in all cases. Each case is considered on its merits.

I HEREBY CERTIFY THAT ALL STATEMENTS ARE FULL AND CORRECT TO THE BEST OF MY KNOWLEDGE, I AM AWARE THAT ALL STATEMENTS CONTAINED HEREIN WILL BE VERIFIED AND THAT WILLFUL MISREPRESENTATION WILL RESULT IN DISMISSAL.

_____ **DATE**

_____ **SIGNATURE**

NOTE: State law provides that no person under 18 years may be employed unless he has an employment certificate obtained from an authorized school district official.