



MUNICIPAL SERVICES COMMISSION

Of the City of New Castle, Delaware

216 Chestnut Street, PO Box 208 ▪ New Castle, DE 19720-028

<http://newcastlemsc.delaware.gov>

Office: 302-323-2330 ▪ Utility Building: 302-323-2333 ▪ Fax: 302-323-2337

Application for Employment

Equal Employment Opportunity Policy

We welcome you as an applicant for employment. Your application will be considered with others in competition for the position in which you are interested. It is the policy and intent of the Municipal Services Commission to provide equality of opportunity in employment to all persons. This policy prohibits discrimination because of race, color, religion, national origin, marital status, physical or mental disability, sex, genetic information (including family history), sexual orientation, gender identity, or age, in all aspects of our personnel policies, programs, practices, and operations. This policy applies to all phases of employment.

All information contained in or connected with this application will be considered personal and confidential and used only in connection with your possible employment by the Municipal Services Commission. Please furnish us with complete information as outlined in this application. You are encouraged to attach any additional information which you believe qualifies you for the position for which you are applying.

Date: _____ Position Applied for: _____

PERSONAL INFORMATION

Last Name: _____ First Name: _____ MI: _____

Address: _____

Home Telephone: _____ Cell Phone: _____

Email Address: _____

Do you have a valid driver's license? Yes No If yes, what class?: _____

Are you a citizen of the United States or otherwise legally eligible for employment in the United States?

Yes No

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EDUCATIONAL INFORMATION

Highest Grade Education Level Completed:

- | | | |
|-----------------------|-------------------------|------------------------|
| Less than high school | High School Diploma/GED | Technical/Trade School |
| Some College | 2 year College Degree | 4 year College Degree |
| Graduate Degree | Post Graduate Degree | |

	Name and Location of School	Diploma/Degree/Major Earned:
High School	_____	_____
Technical/Trade	_____	_____
College/University	_____	_____
Graduate School	_____	_____
Other	_____	_____

List any special courses, seminars, workshops, licenses, certificates related to this position:

List any personal skills related to this position:

Reason for applying for this position: _____

EMPLOYMENT EXPERIENCE

Employer 1: _____

Title: _____ Dates Employed: _____

Address: _____ May we contact: Yes No

Telephone Number: _____ Supervisor: _____

Duties Performed:

Reason for Leaving: _____

Employer 2: _____

Title: _____ Dates Employed: _____

Address: _____ May we contact: Yes No

Telephone Number: _____ Supervisor: _____

Duties Performed:

Reason for Leaving: _____

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Employer 3: _____

Title: _____ Dates Employed: _____

Address: _____ May we contact: Yes No

Telephone Number: _____ Supervisor: _____

Duties Performed:

Reason for Leaving: _____

CERTIFICATION

I hereby certify that the answers given by me to the foregoing questions and statements made by me are full and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts in this application or any supplements thereto is cause for rejection of my application or discharge at any time during my employment.

I understand that if hired by Municipal Services Commission, the Commission shall require verification of my identity and authorization for employment in the United States.

I understand that I voluntarily authorize my former employers, schools, and persons named herein to give information regarding me. I hereby release the Municipal Services Commission from any liability or claim whatsoever for issuing this information.

I understand this application does not in any way constitute a contract of employment between the applicant and the Commission.

Applicant's Signature: _____ Date: _____

Print Name: _____