

**APPLICATION FOR CIVIL SERVICE EMPLOYMENT**



**City of Philadelphia**  
 Office of Human Resources  
 1401 J. F. Kennedy  
 Boulevard, Room 1640  
 Philadelphia, PA 19102  
 www.phila.gov/personnel

*Visit us at: [www.phila.gov/personnel](http://www.phila.gov/personnel)*

**QUESTIONS WITH AN \* REQUIRE A RESPONSE. YOUR APPLICATION MAY NOT BE CONSIDERED IF INCOMPLETE OR UNSIGNED.**

**JOB INFORMATION**

* EXAMINATION NUMBER:	* POSITION TITLE:
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**PERSONAL**

* FIRST NAME	MIDDLE INITIAL	* LAST NAME	* SOCIAL SECURITY NUMBER																				
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* ADDRESS																							
* CITY	* STATE		* ZIP																				
* HOME PHONE		ALTERNATE PHONE																					
* EMAIL ADDRESS		* WHICH METHOD DO YOU PREFER TO BE NOTIFIED ABOUT YOUR APPLICATION STATUS? <input type="checkbox"/> EMAIL OR <input type="checkbox"/> PAPER																					

**EDUCATION**

WHAT IS YOUR HIGHEST LEVEL OF EDUCATION:  
 SOME HIGH SCHOOL     HIGH SCHOOL     SOME COLLEGE     TECHNICAL COLLEGE  
 ASSOCIATE'S DEGREE     BACHELOR'S DEGREE     MASTER'S DEGREE     DOCTORATE

**HIGH SCHOOL EDUCATION**

DID YOU GRADUATE FROM HIGH SCHOOL OR RECEIVE A G.E.D.?  YES     NO  
 IF "NO", WHAT WAS THE HIGHEST LEVEL COMPLETED?  7     8     9     10     11     12

SCHOOL NAME	CITY	STATE
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**COLLEGE / UNIVERSITY EDUCATION**

SCHOOL NAME	DEGREE RECEIVED	
SCHOOL LOCATION (CITY/STATE)	DID YOU GRADUATE? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> SEMESTER <input type="checkbox"/> QUARTER # OF UNITS COMPLETED:
MAJOR	DATE CONFERRED	

SCHOOL NAME	DEGREE RECEIVED	
SCHOOL LOCATION (CITY/STATE)	DID YOU GRADUATE? <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> SEMESTER <input type="checkbox"/> QUARTER # OF UNITS COMPLETED:
MAJOR	DATE CONFERRED	

**DRIVER'S LICENSE INFORMATION**

* DO YOU HAVE A VALID LICENSE? <input type="checkbox"/> YES <input type="checkbox"/> NO	STATE WHERE ISSUED	CLASS
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**CERTIFICATES & LICENSES**

TYPE	DATE ISSUED (MONTH/YEAR)	EXPIRATION DATE (MONTH/YEAR)
LICENSE NUMBER	ISSUING AGENCY	

TYPE	DATE ISSUED (MONTH/YEAR)	EXPIRATION DATE (MONTH/YEAR)
LICENSE NUMBER	ISSUING AGENCY	

**WORK HISTORY**

DATES From _____ To _____	EMPLOYER	POSITION TITLE
ADDRESS	CITY	STATE
COMPANY WEBSITE	PHONE NUMBER	SUPERVISOR (NAME & TITLE)
HOURS WORKED PER WEEK	MONTHLY SALARY	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
DUTIES		
REASON FOR LEAVING		
DATES From _____ To _____	EMPLOYER	POSITION TITLE
ADDRESS	CITY	STATE
COMPANY WEBSITE	PHONE NUMBER	SUPERVISOR (NAME & TITLE)
HOURS WORKED PER WEEK	MONTHLY SALARY	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
DUTIES		
REASON FOR LEAVING		
DATES From _____ To _____	EMPLOYER	POSITION TITLE
ADDRESS	CITY	STATE
COMPANY WEBSITE	PHONE NUMBER	SUPERVISOR (NAME & TITLE)
HOURS WORKED PER WEEK	MONTHLY SALARY	MAY WE CONTACT THIS EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO
DUTIES		
REASON FOR LEAVING		

**SKILLS**

<b>LANGUAGES OTHER THAN ENGLISH THAT YOU ARE PROFICIENT IN</b>	
LANGUAGE _____ <input type="checkbox"/> SPEAK <input type="checkbox"/> READ <input type="checkbox"/> WRITE	LANGUAGE _____ <input type="checkbox"/> SPEAK <input type="checkbox"/> READ <input type="checkbox"/> WRITE

## AGENCY WIDE QUESTIONS

The purpose of the following questions is to provide us with statistics needed to evaluate our recruitment program as well as to prepare statistical reports required by Federal, State and local agencies. The information obtained also includes additional job related information to better evaluate you for the position for which you are applying.

**QUESTIONS WITH AN \* REQUIRE A RESPONSE. YOUR APPLICATION MAY NOT BE CONSIDERED IF INCOMPLETE OR UNSIGNED.**

\*1. ARE YOU CURRENTLY AN EMPLOYEE OF THE CITY OF PHILADELPHIA?  YES  NO

2. IF YOU ANSWERED "YES" TO QUESTION 1, PLEASE PROVIDE THE NAME OF THE DEPARTMENT IN WHICH YOU WORK.

3 IF YOU ANSWERED "YES" TO QUESTION 1, PLEASE PROVIDE YOUR PAYROLL NUMBER.

**\*4. RESIDENCY**

ARE YOU CURRENTLY A CITY OF PHILADELPHIA RESIDENT?  YES  NO

\*5. IF YOU HAVE INDICATED THAT YOU ARE NOT CURRENTLY A RESIDENT OF THE CITY OF PHILADELPHIA IN QUESTION 4, DO YOU AGREE TO ESTABLISH RESIDENCE IN THE CITY OF PHILADELPHIA, IF HIRED, WITHIN THE TIME SPECIFIED ON THE EXAM ANNOUNCEMENT FOR THE POSITION TO WHICH YOU ARE APPLYING?  YES  NO  N/A (Currently a resident)

**LEGACY PREFERENCE (APPLIES ONLY TO OPEN COMPETITIVE EMPLOYMENT OPPORTUNITIES)**

Preference points are awarded to an eligible child\* of a Philadelphia Firefighter or Police who was killed or died in the line of duty\*\* AND who passes the examination for an Open Competitive position.

6. DO YOU CLAIM LEGACY PREFERENCE?  YES  NO

*\* An Eligible Child is defined as biological and adopted children, stepchildren, and children to whom the Police Officer or Firefighter stood in Loco Parentis.*

*\*\* The Line of Duty is defined as working in an official capacity in one of the uniformed classes in the Police and Fire series of class for the City of Philadelphia.*

TO RECEIVE THE TEN (10) POINTS FOR LEGACY PREFERENCE, THE FOLLOWING DOCUMENTATION MUST BE SUBMITTED WITH YOUR APPLICATION:

- A. DOCUMENTARY PROOF OF RELATIONSHIP TO THE DECEASED PARENT.
- B. DEATH CERTIFICATE OF THE PARENT.
- C. SUCH OTHER PROOF AS MAY BE ACCEPTABLE TO THE DIRECTOR.

LEGACY PREFERENCE, PROPERLY CLAIMED, MAY BE GRANTED AT ANY TIME BETWEEN THE DATE THE ELIGIBLE LIST IS ESTABLISHED AND THE DATE THE ELIGIBLE LIST EXPIRES OR IS ABOLISHED.

\*7. HAVE YOU BEEN CONVICTED OF A MISDEMEANOR, GROSS MISDEMEANOR OR FELONY FOR WHICH A JAIL SENTENCE WAS OR COULD HAVE BEEN IMPOSED?  YES  NO

8. IF YOU ANSWERED "YES" TO QUESTION NUMBER 7 – PLEASE EXPLAIN:

(A conviction will not necessarily disqualify you for employment, failure to disclose a conviction which is later discovered as a result of a criminal background check will be cause to disqualify you from employment for falsification of this application)

**VETERANS PREFERENCE (APPLIES ONLY TO OPEN COMPETITIVE EMPLOYMENT OPPORTUNITIES)**

Preference points are awarded to qualified Veterans and spouses of deceased or disabled Veterans and are added to the exam results of passing candidates.

9. DO YOU CLAIM VETERAN'S PREFERENCE?  YES  NO

**YOU MUST SUPPLY A COPY OF YOUR DD214.** SPOUSES APPLYING FOR PREFERENCE POINTS MUST SUPPLY THEIR MARRIAGE CERTIFICATE, THE VETERAN'S DD214 AND DEATH CERTIFICATE OR PROOF OF DISABILITY.

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This section will be detached upon application receipt by Human Resources.



**EEO DATA**

PROVIDING THIS INFORMATION IS NOT MANDATORY. HOWEVER, IT IS REQUESTED IN ORDER TO PROVIDE STATISTICAL DATA IN MONITORING AND ENSURING THE CITY OF PHILADELPHIA'S COMMITMENT TO EQUAL EMPLOYMENT OPPORTUNITY.

EXAM #: \_\_\_\_\_

SEX:  MALE  FEMALE

CHECK THE SPACE FOR THE RACIAL OR ETHNIC GROUP WITH WHICH YOU IDENTIFY:

- American Indian or Alaska Native (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Hispanic or Latino

- Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)
- White (not Hispanic or Latino)
- Multi-Racial
- Unknown

*10. HAVE YOU HAD ANY TRAFFIC RELATED INFRACTIONS IN THE LAST FIVE (5) YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
11. IF YOU ANSWERED "YES" TO NUMBER 10 – PLEASE EXPLAIN:	
*12. HAVE YOU EVER BEEN DISMISSED FROM EMPLOYMENT FOR INEFFICIENCY, DELINQUENCY, OR MISCONDUCT, OR HAVE YOU EVER BEEN PERMITTED TO RESIGN TO AVOID DISMISSAL? <input type="checkbox"/> YES <input type="checkbox"/> NO	
*13. ARE YOU RELATED TO ANYONE WHO IS A CURRENT EMPLOYEE OF THE CITY OF PHILADELPHIA? <input type="checkbox"/> YES <input type="checkbox"/> NO	
14. IF YOU ANSWERED "YES" TO QUESTION 13, PLEASE PROVIDE THE FULL NAME AND DEPARTMENT OF THE PERSON TO WHOM YOU ARE RELATED.	
15. HOW DID YOU LEARN ABOUT THIS POSITION? (PLEASE CHECK ONE)	
<input type="checkbox"/> Phila.Gov <input type="checkbox"/> Visited Application Center <input type="checkbox"/> Philadelphia Inquirer <input type="checkbox"/> Philadelphia Daily News <input type="checkbox"/> Philadelphia Metro <input type="checkbox"/> Community Newspaper	<input type="checkbox"/> Government Jobs.com <input type="checkbox"/> Other Website <input type="checkbox"/> Friend/Relative <input type="checkbox"/> Job Hotline <input type="checkbox"/> Educational Institution <input type="checkbox"/> City of Philadelphia Recruiter
16. DO YOU REQUIRE ANY SPECIAL ACCOMMODATIONS IN ORDER TO PARTICIPATE IN THE AGENCY HIRING PROCESS? <input type="checkbox"/> YES <input type="checkbox"/> NO	
The accommodation will be arranged if you meet the minimum training and experience requirements established for the examination for which you are applying.	

**APPLICANT DECLARATIONS**

Read this application and your answers carefully before signing below.

I certify that the statements made by me in conjunction with this application are true, complete and correct to the best of my knowledge and belief and are made in good faith. I understand that if I knowingly make any misstatement of facts I am subject to disqualification or dismissal and to such other penalties as may be prescribed by law, ordinance, or civil service regulations.

I understand and agree that as a condition of employment with the city, I shall be required to certify that I am fully current on any and all debts, taxes, fees, judgments, claims, and other accounts and obligations due and owing to the city; and shall be required to promise that I will remain fully current throughout employment with the city. If I become delinquent on such obligations, I shall be required, as a condition of employment, to enter into a payment agreement. For so long as I am employed by the city, the amount of the payment as set forth in the payment agreement (not to exceed twenty percent (20%) of the person's gross pay without the person's consent) shall be withheld from each paycheck until all debts, taxes, fees, judgments, and other accounts and obligations due and owing to the city are fully satisfied.

I understand and agree that an investigation may be made to verify the truthfulness of the statements contained in this application, including, but not limited to, information provided regarding prior employment, skills and qualifications, education, indebtedness to the city of Philadelphia, references and criminal conviction history. I hereby authorize the city of Philadelphia to conduct such an investigation, and release the city of Philadelphia and its subsidiaries, affiliates, employees, agents and representatives from any and all liability as a result of any inquiries made while conducting this investigation.

I have read and understand the above information.

X \_\_\_\_\_  
**SIGNATURE OF APPLICANT**

\_\_\_\_\_  
**DATE**



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