



OFFICE OF THE DISTRICT ATTORNEY  
 COUNTY OF ALLEGHENY  
**EMPLOYMENT APPLICATION**  
 AN EQUAL OPPORTUNITY EMPLOYER\*

**Stephen A. Zappala, Jr.**  
 DISTRICT ATTORNEY

\* \* \* \* \*

\*FEDERAL, STATE AND LOCAL LAWS PROHIBIT DISCRIMINATION ON THE BASIS OF RACE, COLOR, SEX, AGE, RELIGION, CREED, NATIONAL ORIGIN OR ANCESTRY.

**PLEASE READ CAREFULLY**

1. Submission of an application does not assure employment.
2. Employment is at the discretion of the District Attorney and may be terminated at any time.
3. All employees of the District Attorney may be asked to submit to fingerprinting by a local, state or federal agency.
4. The personal background and work experience information requested in this application will aid in evaluating your potential for employment and proper job placement, so please complete the form as thoroughly as possible.

*Please type or print legibly in ink.*

DATE OF APPLICATION \_\_\_\_\_

1. NAME \_\_\_\_\_  
LAST FIRST MIDDLE

2. ADDRESS \_\_\_\_\_  
NO. STREET CITY STATE ZIP CODE

3. TELEPHONE NO. ( ) \_\_\_\_\_ ( ) \_\_\_\_\_

4. SOCIAL SECURITY NO. \_\_\_\_\_

5. POSITION (S) SOUGHT \_\_\_\_\_  
FULL TIME ( ) PART TIME ( ) SUMMER ( )

6. SALARY REQUIREMENT \_\_\_\_\_ DATE AVAILABLE \_\_\_\_\_

7. Are you more than seventeen (17) years of age? \_\_\_\_\_

8. Do you have any relatives currently employed by the office of the District Attorney? \_\_\_\_\_

If yes, list name(s): \_\_\_\_\_

9. Do you have the legal right to work in the United States? Yes \_\_\_\_\_ No \_\_\_\_\_

10. Are you currently holding any public office? If yes, explain \_\_\_\_\_  
 \_\_\_\_\_

11. Have you ever been convicted of a criminal offense (felony, misdemeanor, or summary)? Exclude summary traffic violations punishable by fine only. Yes \_\_\_\_\_ No \_\_\_\_\_

12. Do you have any criminal charge(s) pending against you? Yes \_\_\_\_\_ No \_\_\_\_\_

13. Have you ever forfeited bond or collateral in connection with a criminal charge? Yes \_\_\_\_\_ No \_\_\_\_\_

Conviction of a criminal offense may not be a ban to employment, however, if the answer to question 10, 11 or 12 is "yes", you must provide details on a separate sheet of paper and submit it with the application.

**14. EDUCATION**

NAME OF SCHOOL	ADDRESS OF SCHOOL	YEARS ATTENDED	GRADE AVERAGE	TYPE OF DEGREE	YEAR OF DEGREE
HIGH SCHOOL:					
BUSINESS SCHOOL:					
COLLEGE:					
GRADUATE:					

15. Do you type? \_\_\_\_\_ Wpm \_\_\_\_\_

16. List computer skills: \_\_\_\_\_  
 \_\_\_\_\_

17. Are you currently or have you ever been employed by Allegheny County? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, Position Title \_\_\_\_\_ Department \_\_\_\_\_  
 Dates of employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_

**18. EMPLOYMENT HISTORY**

Beginning with PRESENT, or MOST RECENT, list all previous employers, including self-employment, summer and part-time positions. If necessary, use additional blank pages. If applying for attorney position, indicate non-legal work experience below.

NAME & ADDRESS OF FORMER EMPLOYER	DATES EMPLOYED FROM TO	POSITION & SUPERVISOR	REASON FOR LEAVING
Telephone: ( )			
Description of work performed: _____			
Final /Present Salary: _____			
Telephone: ( )			
Description of work performed: _____			
Final /Present Salary: _____			
Telephone: ( )			
Description of work performed: _____			
Final /Present Salary: _____			

18. May inquiry be made of your present or most recent employer regarding your character, qualifications and record of employment? YES \_\_\_\_\_ NO \_\_\_\_\_

19. If presently employed, why do you wish to change your position?

20. If presently unemployed, what have you done since your last job?

21. Have you ever been fired from any job or quit a job after being informed that you would be fired?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**22. U.S. MILITARY SERVICE**

PERIOD IN SERVICE		BRANCH	HIGHEST RANK ATTAINED	TYPE & DATE OF DISCHARGE
YEARS	MONTHS			

**References**

23. List two people who are not related to you and who are not former employers who have knowledge of your qualifications and to whom we can refer.

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
Phone No. Occupation

\_\_\_\_\_  
Name Address

\_\_\_\_\_  
Phone No. Occupation

In filing this application, I hereby declare that my answers are true, and understand that misrepresentation or omission of the facts called for herein will be sufficient cause for dismissal. I hereby agree to take a physical and other examinations whenever required by the District Attorney's Office, whether prior to or subsequent to employment. I hereby authorize the investigation by the District Attorney's Office of any and all statements contained in this application. I further agree to accept and abide by all regulations, policies and practices of the office relating to its employees.

\_\_\_\_\_  
Signature

**DO NOT WRITE BELOW THIS LINE**

LEGAL NAME \_\_\_\_\_ D.O.B. \_\_\_\_\_

STARTING DATE \_\_\_\_\_ RACE \_\_\_\_\_ SEX \_\_\_\_\_

APPLICANT REFERRED BY \_\_\_\_\_

JOB NO. \_\_\_\_\_ JOB TITLE \_\_\_\_\_

SALARY : ANNUAL \_\_\_\_\_ MONTHLY \_\_\_\_\_

INTERVIEWED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

I authorize and consent to the release of information and records to the Office of the District Attorney of Allegheny County by any person or entity not a consumer-reporting agency to assist the District Attorney's Office in completing a background investigation relative to my application for employment.

I understand that as a part of the District Attorney's procedure for processing employment applications 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 I have been acquainted. This inquiry may include information as to my character, general reputation, personal characteristics, and mode of living, 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 District Attorney 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, I understand that the District Attorney's Office shall so advise me and shall supply me with the name and address of the consumer reporting agency making the report.

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Applicant