

**THE WILMINGTON PARKING AUTHORITY  
LINDEN BUILDING  
625 N. ORANGE STREET  
WILMINGTON, DE 19801-2222**

**APPLICATION FOR EMPLOYMENT**

The Wilmington Parking Authority is an Equal Opportunity Employer. We are committed to equal treatment of applicants and employees regardless of race, color, religion, national origin, sex, disability, age, marital or veteran's status.

Date: \_\_\_\_\_

Full Name: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Citizen of U.S.A.: YES or NO If no, do you have work authorization? \_\_\_\_\_

Are you under 18? \_\_\_\_\_ Do you have any other job? \_\_\_\_\_ Explain \_\_\_\_\_

Position desired \_\_\_\_\_ Wages per hour desired: \_\_\_\_\_

Full Time: \_\_\_\_\_ Part Time: \_\_\_\_\_ If part time when available? \_\_\_\_\_

Have you ever applied for a job here before? \_\_\_\_\_ When? \_\_\_\_\_

Do you have any friends or relatives in our employ? Name \_\_\_\_\_ Relationship \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

In case of accident notify: \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

<u>EDUCATION</u>	<u>NAME &amp; LOCATION OF SHOOOL</u>	<u># OF YEARS</u>	<u>COURSE</u>	<u>GRADUATE YES OR NO</u>
Grade School				
High School				
College/University				
Special Courses				

Do you have a valid driver's license? \_\_\_\_\_ State \_\_\_\_\_ Number \_\_\_\_\_

Have you ever been convicted of a state or federal offense? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Give names and addresses of all previous employers beginning with your current or last place of employment. May we talk with them about you? YES \_\_\_\_\_ NO \_\_\_\_\_

If no, why not? \_\_\_\_\_

<u>FROM</u>	<u>TO</u>	<u>EMPLOYER'S NAME &amp; ADDRESS</u>	<u>KIND OF WORK</u>	<u>WAGES</u>	<u>REASON FOR LEAVING</u>

Have you ever been employed in a garage, a service station or parking operations? \_\_\_\_\_ If yes, give details \_\_\_\_\_

Have you served in the Armed Forces of the USA? \_\_\_\_\_ Rank and Branch \_\_\_\_\_

Date of Discharge \_\_\_\_\_ Type of Discharge \_\_\_\_\_

Have you ever been bonded? \_\_\_\_\_ Has a bond application ever been denied? \_\_\_\_\_

If so, by whom? \_\_\_\_\_ Reason? \_\_\_\_\_

Any reason you could not be bonded? \_\_\_\_\_

\_\_\_\_\_

**BACKGROUND INVESTIGATION AUTHORIZATION  
AND RELEASE OF LIABILITY**

In connection with my application for **The Wilmington Parking Authority**, I understand that J.R. Gettier & Associates, Inc. may investigate my background by obtaining consumer credit, criminal, driving, personal reference, job reference, and other reports pertaining to me. This may include conversations with persons who have knowledge or information about such matters. This investigation will be conducted, and reports obtained, to provide J.R. Gettier & Associates, Inc. with information regarding my character, general reputation, personal characteristics, mode of living, work record and characteristics skills and abilities, education and training, employment experience, past job performance, reasons for termination of previous employment and other pertinent information.

I understand that J.R. Gettier & Associates, Inc. may request information from federal, state and local government agencies, schools, current and previous employers, personal acquaintances, and other appropriate sources of information that maintain records or have knowledge of my education, employment, consumer credit, criminal, driving and other relevant activities, experiences and records including, but not limited to, my character, general reputation, personal characteristics and mode of living.

I understand that I have the right to request in writing, within a reasonable period of time, a complete and accurate disclosure of the nature and scope of any investigative consumer report requested on me and, if denied employment wholly or partly because of information contained in a consumer report from a reporting agency, I have the right to be so advised and supplied with the name and address of the consumer reporting agency making the report.

I authorize, without reservation, any person or entity contacted by J.R. Gettier & Associates, Inc. to furnish the above-stated information, and I release any such person or entity from any and all liability for furnishing such information. I also release J.R. Gettier & Associates, Inc. from any and all liability for conducting such an investigation

**PLEASE PRINT THE FOLLOWING INFORMATION – NEATLY**

NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

DRIVER'S LICENSE# \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_ HOW LONG \_\_\_\_\_

ADDRESSES FOR THE PAST TEN (10) YEARS \_\_\_\_\_

APPLICANT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**REFERENCES:**

Give names of 3 local persons not related to you whom you have known as least 1 year:

Name	Address	# of Yrs. Known	Relationship Work/Other	Phone #

I authorize investigation of all statements contained in this application, and I release from all liability all persons and organizations providing information in response to such investigation. I understand that, if hired, I may be discharged for providing false information or for omitting information requested on this application. All employment is for an indefinite period of time and may be terminated at any time regardless of cause. I agree to be responsible for all damages caused by my negligence and for any shortage of funds in my custody.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**