



Pennsylvania Gaming Control Board
Employment Application

SECTION 1 – PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL
E-MAIL ADDRESS		TELEPHONE #
MAILING ADDRESS – STREET & NUMBER		
CITY	STATE	ZIP CODE
DATE AVAILABLE FOR WORK	MINIMUM ACCEPTABLE SALARY	
POSITION THAT YOU ARE APPLYING FOR:		
PLEASE INDICATE THE LOCATION(S) IN WHICH YOU ARE AVAILABLE TO WORK: (NOTE: MOST PGCB POSITIONS ARE LOCATED IN HARRISBURG)		
<input type="checkbox"/> HARRISBURG <input type="checkbox"/> PHILADELPHIA <input type="checkbox"/> PITTSBURGH <input type="checkbox"/> ERIE <input type="checkbox"/> WILKES-BARRE		
WHICH AREA(S) ARE YOU APPLYING FOR:		
<input type="checkbox"/> ADMINISTRATIVE/CLERICAL <input type="checkbox"/> GAMING LABORATORY <input type="checkbox"/> INFORMATION TECHNOLOGY <input type="checkbox"/> COMMUNICATIONS <input type="checkbox"/> FINANCE/BUDGET <input type="checkbox"/> AUDIT OR INTERNAL CONTROL <input type="checkbox"/> COMPULSIVE GAMBLING PROGRAMS <input type="checkbox"/> LICENSING <input type="checkbox"/> INVESTIGATIONS <input type="checkbox"/> CASINO COMPLIANCE <input type="checkbox"/> HUMAN RESOURCES <input type="checkbox"/> LEGAL <input type="checkbox"/> MISCELLANEOUS		
ARE YOU SUBJECT TO ANY VISA OR IMMIGRATION STATUS WHICH WILL PREVENT LAWFUL EMPLOYMENT? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU OVER THE AGE OF 21? <input type="checkbox"/> YES <input type="checkbox"/> NO

SECTION 2 – EDUCATION (*please indicate education or training which you believe qualifies you for the position you are seeking*)

HIGH SCHOOL – NUMBER OF YEARS COMPLETED: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	DIPLOMA/G.E.D? <input type="checkbox"/> YES <input type="checkbox"/> NO
SCHOOL NAME	CITY/STATE
COLLEGE – NUMBER OF YEARS COMPLETED: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	MAJOR(S): DEGREE EARNED: <input type="checkbox"/> YES <input type="checkbox"/> NO
SCHOOL NAME	CITY/STATE
COLLEGE – NUMBER OF YEARS COMPLETED: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	MAJOR(S): DEGREE EARNED: <input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER TRAINING OR DEGREES:	

SECTION 3 – PROFESSIONAL LICENSE OR MEMBERSHIP:

CERTIFICATION(S) OR LICENSE(S) HELD:
PROFESSIONAL MEMBERSHIP(S):

SECTION 4 – EMPLOYMENT (*List last employer first, including U.S. Military Service*)

Please note: *If the description of duties includes information that is provided in the resume, you may indicate that by typing “please see attached resume for more information.”*

EMPLOYER:	STILL EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO
DATES OF EMPLOYMENT: TO: FROM:	TITLE:
BRIEF DESCRIPTION OF DUTIES:	

EMPLOYER:	STILL EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO
DATES OF EMPLOYMENT: TO: FROM:	TITLE:
BRIEF DESCRIPTION OF DUTIES:	

EMPLOYER:	STILL EMPLOYED? <input type="checkbox"/> YES <input type="checkbox"/> NO
DATES OF EMPLOYMENT: TO: FROM:	TITLE:
BRIEF DESCRIPTION OF DUTIES:	

***Please attach a separate sheet for additional employment.**

SECTION 5 - CERTIFICATION AND ACKNOWLEDGEMENT

I certify that all the statements made by me are true, complete and correct, to the best of my knowledge and belief, and are made in good faith. I am aware that all statements made by me on this document are subject to investigation.

I acknowledge that the Board shall not hire a prospective employee who has been convicted of a crime that bears a close relationship to the duties and responsibilities of the position for which employment is sought; who has been dismissed from other employment for gross misconduct; or who has intentionally made false statement concerning a material fact in connection with the application for employment.

I acknowledge, that no offer of employment is final until a thorough background investigation of a prospective employee is conducted, and the Board accepts the prospective employee as meeting the standards of employment.

I further acknowledge that pursuant to 4 Pa.C.S. Sections 1201 (h) and (m), prospective employees are required to:

- *Submit a complete Personal History Questionnaire complete with criminal history;*
- *Submit to testing to detect the presence of illegal substances in the body;*
- *Submit fingerprints and photographs as required by the Pennsylvania State Police;*
- *Sign a Post-Employment Restriction Affidavit;*
- *Submit to, and cooperate with, other investigative requests as deemed necessary.*

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SIGNATURE OF APPLICANT

DATE



Pennsylvania Gaming Control Board
Candidate Voluntary Self-Identification Form

Please be advised that the PGCB tracks applicants by gender and race/ethnicity for each position vacancy. We are an organization that values diversity and encourages women and minorities to apply for positions within our agency. To assist us with our diversity efforts, we invite you to voluntarily complete the following survey so that you may self-identify your gender and/or race/ethnicity.

The information collected on this form is kept separate from the rest of your employment application and will only be used for research and reporting purposes. COMPLETION AND SUBMISSION OF THIS FORM IS VOLUNTARY AND REFUSAL TO PROVIDE THE INFORMATION WILL HAVE NO AFFECT ON YOUR APPLICATION OR SELECTION. Responses to this form will remain confidential within our Office of Human Resources, and will only be used for necessary reasons associated with our EEOC Program. When reported, data will not be associated with any specific individuals.

Please check the appropriate response to each question:

GENDER	<input type="checkbox"/> MALE	<input type="checkbox"/> FEMALE	<input type="checkbox"/> UNDECLARED
RACE (HOW DO YOU DESCRIBE YOURSELF?)			
<input type="checkbox"/> HISPANIC/LATINO: Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.			
<input type="checkbox"/> WHITE (NOT HISPANIC/LATINO): Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.			
<input type="checkbox"/> BLACK/AFRICAN-AMERICAN (NOT HISPANIC/LATINO): Persons having origins in any of the Black racial groups of Africa.			
<input type="checkbox"/> NATIVE HAWAIIAN/PACIFIC ISLANDER (NOT HISPANIC/LATINO): Persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.			
<input type="checkbox"/> ASIAN (NOT HISPANIC/LATINO): Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent. This area includes, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.			
<input type="checkbox"/> NATIVE AMERICAN/ALASKAN (NOT HISPANIC/LATINO): Persons having origins in any of the original peoples of North, Central, and South America, and who maintain tribal affiliation or community attachment.			
<input type="checkbox"/> TWO OR MORE RACES (NOT HISPANIC/LATINO): Persons who identify with more than one of the races described above.			

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