## CITY OF LANCASTER CONVICTION REVIEW FORM

NAME			
EXACT TITLE OF POSITION FOR WHICH YOU ARE APPLYING			
<ul> <li>DO NOT SUBMIT THIS FORM WITH YOUR APPLICATION. If you are selected to proceed to the next step in the employment process, you meet the minimum qualifications for the position. At that time, you are required to complete and submit this form if:         <ul> <li>You have been convicted of a felony or misdemeanor other than a minor traffic violation; or</li> <li>A marijuana conviction less than two (2) years old.</li> </ul> </li> <li>Failure to complete and submit this form if the above applies may result in DISQUALIFICATION. Conviction is not a bar to employment.</li> </ul>			
DATE OF OFFENSE	CHARGES		
DISPOSITION (SENTENCE)		DATE OF ACTION	CITY/STATE OF CONVICTION
ARE YOU CURRENTLY ON PAROLE			
ADDITIONAL INFORMATION			
DATE OF OFFENSE	CHARGES		
DISPOSITION (SENTENCE)		DATE OF ACTION	CITY/STATE OF CONVICTION
ARE YOU CURRENTLY ON PAROLE □NO □YES (If yes, state the conditions of your parole.)			
ADDITIONAL INFORMATION			
			1
SIGNATURE			DATE