

APPLICATION FOR EMPLOYMENT

Position Applied for: _____ **Date:** _____

| | | |
|-----------------------|----------------------|-----------------------|
| | | |
| | | |
| <i>Last Name</i> | <i>First Name</i> | <i>Middle Initial</i> |
| | | |
| <i>Address</i> | | |
| | | |
| <i>City</i> | <i>State</i> | <i>Zip Code</i> |
| | | |
| <i>Cell Phone No.</i> | <i>email address</i> | |
| | | |

Are you 18 years old or older: Yes No

Are you eligible for employment in the USA: Yes No

Were you previously employed by Upper Makefield Township: Yes No

If yes, please give approximate date: _____

List any relative working for the Township: _____

Are you currently employed? Yes No

If yes, may we contact your current employer? Yes No

If selected, on what date will you be available for work? _____

License # _____ Do you possess a CDL? Yes No If yes, what Class? _____

Are you a volunteer fireman/EMT?: Yes No

If yes, name of service: _____

Were you in the United States Armed Forces: Yes No

If yes, what branch? _____

Have you been convicted of a felony within the last seven years? Yes No
(Conviction will not necessarily disqualify an applicant from employment.)

If yes, please explain: _____

EDUCATION

| | HIGH SCHOOL | COLLEGE/ UNIVERSITY | OTHER (Trade and/or Post-Graduate) |
|-----------------------------------------|--------------------|--------------------------------|-------------------------------------------------|
| School Name/ Location | | | |
| # of Years Completed | | | |
| Did you Graduate? | | | |
| Year of Graduation/ Last attended | | | |
| Course of Study | | | |

Describe any specialized training, apprenticeship, skills and extra-curricular activities: _____

State any additional information you feel may be helpful in considering your application: _____

REFERENCES

Give names, telephone numbers and occupations of three references who are not related to you and are not previous employers:

| |
|----------------------------------------------------------------------|
| 1. Name _____ Occupation _____ Phone _____ Years Acquainted _____ |
| 2. Name _____ Occupation _____ Phone _____ Years Acquainted _____ |
| 3. Name _____ Occupation _____ Phone _____ Years Acquainted _____ |

EMPLOYMENT

Please begin with your present/last employer.

Employer: _____ Length of Service: _____

Position/Work Performed: _____

Address: _____

Supervisor: _____ Telephone No. _____

Reason for Leaving: _____

Employer: _____ Length of Service: _____

Position/Work Performed: _____

Address: _____

Supervisor: _____ Telephone No. _____

Reason for Leaving: _____

Employer: _____ Length of Service: _____

Position/Work Performed: _____

Address: _____

Supervisor: _____ Telephone No. _____

Reason for Leaving: _____

Employer: _____ Length of Service: _____

Position/Work Performed: _____

Address: _____

Supervisor: _____ Telephone No. _____

Reason for Leaving: _____

Please list any job-related skills: _____

CONDITIONS

In making this application, the undersigned hereby certifies that all information provided is true and correct and hereby gives Upper Makefield Township permission to contact the employers and educational institutions listed on this application. Furthermore, the undersigned authorizes and consents to the release of information and records bearing on his or her academic record, financial and credit history, job performance, arrests and convictions, if any, to Upper Makefield Township. The undersigned understands that this application is not a contract of employment.

Signature of Applicant

Date

Application must be filled out in its entirety. Any application that is not filled out in its entirety could be cause for rejection.

Upper Makefield Township is an Equal Opportunity Employer. Upper Makefield Township does not discriminate in employment because of race, color, creed, religion, sex, national origin, age, citizenship or disability as disability is defined in the Americans with Disabilities Act.

Authority for Release of Information and Records

In conjunction with my application for employment with Upper Makefield Township, I hereby authorize and consent to the release of information and records bearing on my personal history, academic records, credit history, job performance, arrests and convictions, if any, to a duly authorized representative of Upper Makefield Township.

This authorization includes permission to obtain copies and abstracts of records and information regarding my background.

The information will be used to assist Upper Makefield Township in completing a background investigation relative to my application for employment with Upper Makefield Township.

This authorization is valid for a period of six months commencing on the date below. Upon request, a copy of this signed statement may be furnished to the school, present or former employer, present or former landlord, doctor, reference, criminal justice agency, or any other person furnishing such information or record.

Name

Date