



Return completed form to the above address attention: Human Resources

Application for Employment

Instructions: It is the policy of the Township to provide equal opportunity with regard to all terms and conditions of employment. The Township complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age, or any other protected characteristic.

Name LAST _____ FIRST _____ MIDDLE _____ Phone(____) _____

Address STREET _____ CITY _____ STATE _____ ZIP CODE _____

Position applied for _____ Expected pay \$ _____

Would you accept full-time work? Yes No Would you accept part-time work? Yes No

On what date would you be available for work? _____

Have you ever been employed here? No Yes

If yes, please give dates _____

Are you legally eligible for employment in the United States? No Yes (If yes, proof is required if hired.)

If you are under 18 years old, can you provide a work permit if required? Yes No

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation) This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job's "essential functions" to respond.

Explain any gaps in your employment, other than those due to personal illness, injury or disability.

Have you ever been fired or asked to resign from a job? No Yes

If yes, please explain _____

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, in the past ten (10) years, which has not been annulled or expunged or sealed by a court? No Yes

If yes, please describe _____

Special Training or Skills

Languages, machine operation, etc., that would be of benefit in the job for which you are applying.



Employment Experience

Place an X by the employer(s) you DO NOT want us to contact. List your most recent employer first.

Employer _____
Contact Name _____
Address _____ Phone(____) _____
Job Title _____ Supervisor _____
Dates employed: from (mm/yy) ____/____ to (mm/yy) ____/____ Hourly rate/salary: starting ____/____ final ____/____
Work performed _____
Reason for leaving _____

Employer _____
Contact Name _____
Address _____ Phone(____) _____
Job Title _____ Supervisor _____
Dates employed: from (mm/yy) ____/____ to (mm/yy) ____/____ Hourly rate/salary: starting ____/____ final ____/____
Work performed _____
Reason for leaving _____

Employer _____
Contact Name _____
Address _____ Phone(____) _____
Job Title _____ Supervisor _____
Dates employed: from (mm/yy) ____/____ to (mm/yy) ____/____ Hourly rate/salary: starting ____/____ final ____/____
Work performed _____
Reason for leaving _____

Employer _____
Contact Name _____
Address _____ Phone(____) _____
Job Title _____ Supervisor _____
Dates employed: from (mm/yy) ____/____ to (mm/yy) ____/____ Hourly rate/salary: starting ____/____ final ____/____
Work performed _____
Reason for leaving _____



Educational Background

High School: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

College: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

Graduate School: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

Vocational Training/Other: _____ Location _____

Course of study _____ Did you graduate? Yes No Degree or diploma _____

Continuing Education _____

Personal References (Not Former Employers or Relatives)

Name and Occupation	Physical Address and Email Address	Phone Number

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the Township's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Township's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Township. I understand that no Township representative, other than the Township Manager, and then only when in writing and signed by the Township Manager, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

Applicant's signature _____ Date _____