

APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE
EQUAL OPPORTUNITY EMPLOYER

PLEASE PRINT

Date: _____

PERSONAL INFORMATION

Name (Last Name First) _____

Present Permanent Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Referred by: _____

Have you ever used another name? Yes No If yes, what name? _____

Is there any other information about change of name which is necessary to check work and educational records? Yes No If yes, please explain. _____

TYPE OF WORK DESIRED

Position for which you are applying: _____

Salary desired: _____ Date you can start: _____

Have you previously applied for employment here? Yes No. If yes, when? _____

Have you previously been employed by East Vincent Township? Yes No. If yes, when and in what position? _____

PLEASE NOTE: THIS APPLICATION FORM WAS DESIGNED FOR USE BY APPLICANTS FOR VARIOUS POSITIONS: CLERICAL, PROFESSIONAL, TECHNICAL AND ADMINISTRATIVE. ANSWER THE QUESTIONS TO THE BEST OF YOUR ABILITY. ALL INFORMATION WILL BE TREATED CONFIDENTIALLY.

Are you currently employed? Yes No

Do you have any commitments to another employer that might affect your employment with us? Yes No If yes, please explain. _____

EDUCATIONAL DATA

School Name	Print Name, Number and Street, City, State and Zip Code for each School Listing	No. of Years Completed	Degree, Major, or Type of Course
High School			
College			
Graduate School			

Trade, Business or Correspondence			
Other			

SKILLS

Equipment you can operate: _____

Do you possess a valid PA driver's license? Yes No If CDL holder, what class? A___ B___

Please include any other information you think would be helpful to us in considering you for employment, such as computer skills, subjects of special study, research work, special training or skills, additional work experience, articles/books published, activities, accomplishments, etc. (You may exclude all information indicative of age, sex, race, religion, color, national origin, or disability.)

MILITARY EXPERIENCE

Were or are you in U.S. Armed Forces? Yes No If yes, what branch? _____

Dates of duty: From: _____ To: _____ Rank at Separation: _____

EMPLOYMENT HISTORY

List below your last four employers, starting with your present employer or most recent employer first (use other side of this application, if necessary).

May we contact these employers? Yes No

1. Name of Employer	Employed From _____ mo./yr. To _____ mo./yr.
Address	Supervisor's Name
Telephone	Your Job Title
Duties	Salary Start: _____ End: _____
Reason for Leaving	

2. Name of Employer

Employed

From _____ mo./yr.

To _____ mo./yr.

Address

Supervisor's Name

Telephone

Your Job Title

Duties

Salary

Start: _____

End: _____

Reason for Leaving

3. Name of Employer

Employed

From _____ mo./yr.

To _____ mo./yr.

Address

Supervisor's Name

Telephone

Your Job Title

Duties

Salary

Start: _____

End: _____

Reason for Leaving

Are you legally authorized to work in the United States? Yes No

Are you below the age of 18? Yes No

Do you know of any reason why you cannot perform the essential functions of the job for which you are applying with or without reasonable accommodation? Yes No

Have you ever been convicted of a criminal offense? Yes No If yes, Date: _____

Place: _____ Nature of offense: _____

(An affirmative answer will not automatically disqualify you from being considered a candidate for employment. Your honesty, the seriousness of the crime and the date of conviction will be considered.)

REFERENCES

List below names of three persons not related to you whom you have known for at least one year.

Name and Address	Occupation	Phone Number	Relationship/Years Known

NOTICE

An investigative report may be made whereby information is obtained through personal interviews with third parties, such as family members, business associates, financial sources, friends, neighbors, or others with whom you are acquainted. These inquiries may seek information about your character, general reputation, personal characteristics, and mode of living, whichever may be applicable. You have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

AUTHORIZATION

I hereby authorize East Vincent Township to conduct a criminal background investigation and to obtain the above-referenced investigative report, which includes, but is not limited to, a credit report, in connection with my Application for Employment to East Vincent Township, and release East Vincent Township, its agents and employees from any liability in connection therewith.

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

I understand that my employment can be terminated, with or without cause, at any time at the discretion of either the Township or myself. I understand that no management official has the authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing or make any oral assurance or promise of continued employment, unless it is in writing and signed by the Board of Supervisors.

I authorize investigation of all statements contained herein and authorize all persons, schools, my current employer (if applicable), and previous employers and organizations named in this application (and accompanying resume, if any) to provide any relevant information, personal or otherwise, that may be required to arrive at an employment decision. I hereby release the Township from all liability for any damage that may result from utilization of such information.

_____ Date

_____ Signature

FOR TOWNSHIP USE ONLY

Interviewed By: _____

Date: _____

REMARKS _____

Neatness: _____

Character: _____

Personality: _____

Ability: _____

Hired: _____ For Department: _____ Position: _____

Will Report: _____ Salary/Wages: _____

Approved By: _____

Date: _____