



EMPLOYMENT APPLICATION

133 Browns Hill Road
 Valencia, Pennsylvania 16059
 (724) 898-3571 www.middlesextownship.org

We consider applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, marital status, or any other legally protected status. Applicants requiring accommodation in the application or hiring process should contact the Township Manager.

(PLEASE PRINT)

Position(s) Applied For:	Desired Salary:	Date of Application:
How did you learn about us?		
<input type="checkbox"/> Advertisement <input type="checkbox"/> Employment Agency <input type="checkbox"/> Friend <input type="checkbox"/> Relative <input type="checkbox"/> Walk-in <input type="checkbox"/> Other _____		

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		

If you are under 18 years of age, can you provide required proof of your eligibility to work? ___ Yes ___ No

Have you ever filed an application with us before? ___ Yes ___ No
 If yes, give date: _____

Have you ever been employed with us before? ___ Yes ___ No
 If yes, give date: _____

Do you have any relatives employed with us? ___ Yes ___ No
 If yes, give name and location: _____

Are you currently employed? ___ Yes ___ No

May we contact your present employer? ___ Yes ___ No

Are you a U.S. citizen or otherwise lawfully authorized to be employed in this country? ___ Yes ___ No
Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: ___ Full Time ___ Part Time
___ Shift Work ___ Temporary

Are you currently on "lay-off" or furlough status and subject to recall? ___ Yes ___ No

Do you have transportation to and from work? ___ Yes ___ No

Are you able to work overtime hours (coming out early for your shift, holding over after your shift, being called out or being scheduled for overtime)? ___ Yes ___ No

If no, please explain: _____

Have you been convicted of a felony or misdemeanor? ___ Yes ___ No
Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain: _____

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate Degree				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and/or write			
	Fluent	Good	Fair
Speak			
Read			
Write			

Describe any relevant special job-related skills, training, and qualifications acquired from employment, volunteer activities, skilled trades, etc.

Describe any job-related training received in the United States military.

Are you requesting consideration of Veteran's status? Yes No
(Note: per decisions of Pennsylvania's Supreme Court, preference for veterans is limited to entry level employment.)

If you are, provide the following information:

Date of Discharge: _____ Type of Discharge: _____
 (Verification of Veteran's status may be required.)

EMPLOYMENT EXPERIENCE

Start with your present or last job. Give the name(s) of your immediate supervisor(s). Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status. **If you need additional space, please continue on a separate sheet of paper.**

1. Employer _____		Dates Employed		Work Performed _____ _____ _____ _____ _____
Address _____		From	To	
Telephone Number(s) _____		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

1. Employer _____		Dates Employed		Work Performed _____ _____ _____ _____ _____
Address _____		From	To	
Telephone Number(s) _____		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

1. Employer _____		Dates Employed		Work Performed _____ _____ _____ _____ _____
Address _____		From	To	
Telephone Number(s) _____		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

1. Employer _____		Dates Employed		Work Performed _____ _____ _____ _____ _____
Address _____		From	To	
Telephone Number(s) _____		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

ADDITIONAL INFORMATION

State any additional information you feel may be helpful to us in considering your application.

REFERENCES

Personal References

1.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	
2.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	
3.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	

Professional References

1.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	
2.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	
3.	_____	_____
	(Name)	(Telephone)
	_____	_____
	(Address)	

If you have been provided a job description, are you able to perform the essential functions of the job with or without accommodations? ___ Yes ___ No

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand that this employment application shall be considered valid for a period of time not to exceed ninety (90) days. If I still desire a position with Middlesex Township after this employment application expires, it will be my duty to complete a new employment application and file it with the Township.

I hereby understand and acknowledge that, unless otherwise defined by applicable law or collective bargaining agreement, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. (The Employer does not discipline employees, including at-will employees, on the basis of race, color, religion, gender, national origin, age, disability, marital status in retaliation for making an employment discrimination claim or utilizing statutorily protected or case law protected rights.)

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all published and inherent rules and regulations of Middlesex Township.

Signature of Applicant

Date

**THANK YOU FOR APPLYING FOR EMPLOYMENT
WITH MIDDLESEX TOWNSHIP**

Middlesex Township Employment Application

WE ARE AN EQUAL OPPORTUNITY EMPLOYER