



# EMPLOYMENT APPLICATION

133 Browns Hill Road  
 Valencia, Pennsylvania 16059  
 (724) 898-3571 [www.middlesextownship.org](http://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? ___ Advertisement ___ Employment Agency ___ Friend ___ Relative ___ Walk-in ___ Other _____		

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

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 *ölay-offö* 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 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 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**

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

## **REFERENCES**

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### **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**