## Employment Application

# Hanover Township

# 11 Municipal Drive

# Burgettstown, PA 15021

# 724-947-9109

|  |
| --- |
| Applicant Information |
| Full Name: |  |  |  | Date: |  |
|  Last | First | M.I. |
| Address: |  |  |
|  Street Address | Apartment/Unit # |
|  |  |  |  |
|  | City | State | ZIP Code |
| Phone: | ( )  | E-mail Address: |  |
| Date Available: |  |  |  | Desired Salary: | $ |
| Position Applied for: |  |
| Are you a citizen of the United States? | YES[ ]  | NO[ ]  | If no, are you authorized to work in the U.S.? | YES[ ]  | NO[ ]  |
| Have you ever worked for this company? | YES[ ]  | NO[ ]  | If so, when? |  |
| Have you ever been convicted of a felony? | YES[ ]  | NO[ ]  |  |
| If yes, explain: |  |
|  |
| Education |
| High School: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |
| College: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |
| Other: |  | Address: |  |
| From: |  | To: |  | Did you graduate? | YES[ ]  | NO[ ]  | Degree: |  |
|  |
| References |
| Please list three professional references. |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: | ( ) |
| Address: |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: | ( ) |
| Address: |  |
| Full Name: |  | Relationship: |  |
| Company: |  | Phone: | ( ) |
| Address: |  |
|  |
| Previous Employment |
| Company: |  | Phone: | ( ) |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
| Company: |  | Phone: | ( ) |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
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| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |
|

|  |  |  |  |
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| Company: |  | Phone: | ( ) |
| Address: |  | Supervisor: |  |
| Job Title: |  | Starting Salary: | $ | Ending Salary: | $ |
| Responsibilities: |  |
| From: |  | To: |  | Reason for Leaving: |  |
| May we contact your previous supervisor for a reference? | YES[ ]  | NO[ ]  |  |

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| Military Service |
| Branch: |  | From: |  | To: |  |
| Rank at Discharge: |  | Type of Discharge: |  |
| If other than honorable, explain: |  |
|  |
| Indicate any foreign languages you speak, read, and or write

|  |  |  |  |
| --- | --- | --- | --- |
|  | Fluent | Good | Fair |
| Speak |  |  |  |
| Read |  |  |  |
| Write |  |  |  |

Describe any specialized training, apprenticeship, skills and extra-curricular activities.Other Qualifications – Summarize special job-related skills and qualifications acquired from employment or other experienceSpecialized Skills Check skills/Equipment OperatedCRT [ ]  Fax [ ]  Production/Mobile Machinery (list) Other (list)PC [ ]  Lotus 1-2-3 [ ]  Calculator [ ]  PBX System [ ] Typewriter [ ]  WordPerfect [ ] List Professional, trade, business or civic activities and offices held.You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected statusState any additional information you feel may be helpful to us in considering your application.Information from a current PA. Drivers LicenseOperators Number: Class: Restrictions:Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.[ ]  YES [ ]  NO |
| Disclaimer and Signature |
|  |
| 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.**This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.**I hereby understand and acknowledge that, unless otherwise defined by applicable law, 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. It is further understood that this “at will” employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.**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 rules and regulations of the employer.* |
| Signature: |  | Date: |  |

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview [ ]  YES [ ]  NO

Remarks:

Employed [ ]  YES [ ]  NO Date of Employment::

Job Title: Hourly Rate/Salary Department::

By:

 (Name and title) (Date)

NOTES: