EMPLOYMENT APPLICATION

Please complete the entire application.

1. Employer Information

Employer:	Mount Pleasant Township
Address:	31 McCarrell Rd
City/State/ZIP:	Hickory, Pennsylvania 15340-1147
Telephone:	724-356-7974

It is the policy of Mount Pleasant Township to provide equal employment opportunities to all applicants and employees without regard to any legally protected status such as race, color, religion, gender, national origin, age, disability or veteran status.

2. Applicant Information

Applica	ant Full Name:	
Home A	Address:	
City/Sta		
Number	r of years at this address:	
Daytime	e phone:Evening phone:	
Mobile	phone:	
Social S	Security Number:	
	s License (State/Number):	_
3. I	Emergency Contact	
Who she	ould be contacted if you are involved in an emergency?	
Contact	t Name:	
Relation	nship to you:	
Address	S:	
City/Sta	ate/ZIP:	
Daytime	e phone:Evening phone:	
4.Job Po Full or 1	osition Applied For: Part Time?	
5. V	Who referred you to our company?	
I 	Do you have any friends or relatives who work here? If yes, ple	ease list here:
-	you applied to our company previously?Yes If yes, when?	No

7.Are you at least	18 years old?	Yes	No

- 8. If you are offered employment, when would you be available to begin work?
- 9. If hired, are you able to submit proof that you are legally eligible for employment in the United States? ____ Yes ____ No
- 10. Are you able to perform the essential functions of the job position you seek with or without reasonable accommodation? Yes No

What reasonable accommodation, if any, would you request?

11. Have you ever been convicted of a felony or misdemeanor?

Yes, I was convicted of ______ on ______ on ______

_____No

THE EXISTENCE OF A CRIMINAL RECORD DOES NOT CONSTITUTE AN AUTOMATIC BAR TO EMPLOYMENT UNLESS RELEVANT TO THE TYPE OF EMPLOYMENT.

12. Applicant's Skills

List any skills that may be useful for the job you are seeking. Enter the number of years of experience, and circle the number which corresponds to your ability for each particular skill. (One represents poor ability, while five represents exceptional ability.)

Ability			
ShillVoors of Europianoo	Datina		or
SkillYears of Experience	Rating	12345	
		1 2 3 4 5	

13. Applicant Employment History

List your current or most recent employment first. Please list all jobs (including self-employment and military service) which you have held, beginning with the most recent, and list and explain any gaps in employment. If additional space is needed, continue on the back page of this application.

Employer Name:	
Supervisor Name:	

Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
Employer Name:
Supervisor Name:
Address:
City/State/ZIP:
Job Duties:
Reason for Leaving:
Dates of Employment (Month/Year):
14 Applicantle Education and Tasining
14. Applicant's Education and Training
College/University Name and Address
Conege/Oniversity Name and Address
Did you receive a degree? Yes No If yes, degree(s) received:
High School/GED Name and Address
Did you receive a degree? Yes No
Other Training (graduate technical vegetional)
Other Training (graduate, technical, vocational):
Please indicate any current professional licenses or certifications that you hold:
Awards, Honors, Special Achievements:
Military Service:
YesNo
Branch:
Specialized Training:

15. References

List any two non-relatives who would be willing to provide a reference for you.

Name:	
Address:	
City/State/ZIP:	
Telephone:	
Relationship:	
I	
Name:	
Address:	
City/State/ZIP:	
Telephone:	
Relationship:	

16. Please provide any other information that you believe should be considered, including whether you are bound by any agreement with any current employer:

CERTIFICATION

I certify that the information provided on this application is truthful and accurate. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize Mount Pleasant Township to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance, and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If an employment relationship is created, I understand that unless I am offered a specific written contract of employment signed on behalf of the organization by its Manager, the employment relationship will be "at-will." In other words, the relationship will be entirely voluntary in nature, and either I or my employer will be able to terminate the employment relationship at any time and without cause. With appropriate notice, I will have the full and complete discretion to end the employment relationship when I choose and for reasons of my choice. Similarly, my employer will have the right. Moreover, no agent, representative, or employee of Mount Pleasant Township, except in a specific written contract of employment signed on behalf of the organization by its Manager, has the power to alter or vary the voluntary nature of the employment relationship.

I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND AND AGREE TO ITS TERMS.

APPLICANT SIGNATURE DATE