

Easttown Township



566 Beaumont Road, Devon, PA 19333
Telephone: 610-687-3000 | Fax: 610-687-9666

EMPLOYMENT APPLICATION

IMPORTANT: Carefully answer all questions in ink in your own handwriting, as this will aid you in obtaining employment. Statements concerning schooling, experience, and references will be investigated.

I. APPLICANT INFORMATION

Full Name: _____ Date: _____

Home Address: _____

Phone: _____

Email: _____ Social Security No.: _____

Position applied for: _____ Date available: _____

Have you ever been convicted of a misdemeanor or felony? YES NO

If yes, please explain: _____

Did anyone refer you? _____

II. WORK EXPERIENCE – List last three places of employment:

1. _____

2. _____

3. _____

May we contact your *present* employer for a reference? YES NO

III. EDUCATION

High School: _____

College (Major/Degree): _____

Technical Training/Other: _____

IV. REFERENCES – List two people able to answer questions concerning your experience and abilities to do this job:

1. Name: _____ Occupation: _____

Address: _____

Phone: _____

2. Name: _____ Occupation: _____

Address: _____

_____ Phone: _____

V. EXPERIENCE

List below specific skills, talents and/or experience that would aid in your employment. You are also encouraged to attach a resume.

VI. CERTIFICATION

In processing my application, Easttown Township may contact my former employers and listed references. My signature below grants my permission to make such contacts. I have indicated whether or not you may contact my *present* employer. I hereby waive my right to access to confidential statements made in recommendations used solely for employment.

I certify that the information and statements in this application are true and complete, and understand that, once submitted, this application becomes the property of Easttown Township. Information on or as part of this statement shall be accorded confidentiality as required by the applicable regulations. This statement is made subject to the penalties of 19 PA C.S. §4902 relating to unsworn falsification to authorities.

I understand that, if employed, falsified statements on this application or any supplement thereto shall be considered sufficient cause for dismissal.

Unless my position is covered by a collective bargaining agreement, I understand that if employed, Easttown Township or I may terminate my employment at any time for any reason.

Dated: _____ Signature: _____

AN EQUAL OPPORTUNITY EMPLOYER

Easttown Township is an equal opportunity employer and adheres to federal and state laws and regulations which prohibit discrimination against any qualified applicant for employment on the basis of race, color, religion, sex, age, national origin, ancestry, handicap or disability.

I, (print name) _____, do hereby authorize Easttown Township to perform a Criminal Background Check for the sole purpose of employment.

Dated: _____ Signature: _____