



Employment Application

APPLICANT INFORMATION											
Last Name					First				M.I.	D.O.B	
Street Address							Apartment/Unit #				
City					State				ZIP		
Phone					E-mail Address						
Date Available to Start				Social Security No.					Desired Salary		
Position Applied for											
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?				YES <input type="checkbox"/>	NO <input type="checkbox"/>		
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?							
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain							
EDUCATION											
High School					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Other					Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				

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 <input type="checkbox"/>	NO <input type="checkbox"/>		
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 <input type="checkbox"/>	NO <input type="checkbox"/>		
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 <input type="checkbox"/>	NO <input type="checkbox"/>		
MILITARY SERVICE						
Branch				From		To
Rank at Discharge				Type of Discharge		
If other than honorable, explain						
REFERENCES						
<i>Please list three professional references.</i>						
Full Name				Relationship		
Company				Phone		
Address						
Full Name				Relationship		
Company				Phone		
Address						
Full Name				Relationship		
Company				Phone		
Address						

DISCLAIMER AND SIGNATURE

I certify that the information provided on this application and any other application materials (and accompanying resume, if any) are true, complete and correct to the best of my knowledge. I understand and agree that any incorrect statement, falsification, material misrepresentation, or omission of any information in connection with this application, resume, and/or other application materials, whenever or however discovered, may disqualify me from further consideration for employment or, if I am hired, may result in my dismissal from employment.

I understand that, if I am given an offer of employment, my employment may be conditioned upon satisfactory completion of a criminal history investigation that may include a fingerprint check. I further understand that, if I am given an offer of employment, my employment may be conditioned upon me taking and passing a physical examination, which may include a drug test. I also understand that if I am hired, during the course of my employment, I may be subject to drug or alcohol testing. I agree to submit to any such lawful test. I understand that my refusal to submit to such lawful test and/or my receipt of a positive test result will disqualify me from further consideration for employment or, if I am hired, may result in my dismissal from employment. Further, I understand that my signature below serves as my consent to a drug or alcohol test and authorizes the release of the results of said test to South Strabane Township for appropriate review.

I understand and agree that, if I am hired, my employment will be on an at-will basis, which means that either I or the Township can terminate the employment relationship at any time, for any reason, with or without cause, and with or without notice. I further understand that, if I am hired, I will not be employed for any specified time, and that this application is not and is not intended to be, a contract for employment or continued employment.

I understand that according to federal law all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and U.S. citizen status or, if aliens, their legal authorization to work in the U.S. As a consequence, I understand that any offer of employment would be contingent on my ability to produce the required documentation within the time period required by law.

I certify that I have read and understand the foregoing paragraphs. I understand that this is simply an application for employment and does not imply I will be employed by South Strabane Township.

Signature		Date	
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