

## Application for Employment

West Deer Township is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color, religion, national origin, ancestry, sex, disabilities, or age (40 and over). Reasonable accommodations for the needs of otherwise qualified applicants with disabilities will be made upon request. All information requested on this application form is solicited for the purpose of determining abilities and skills required for proper job placement and to facilitate verification of the information requested.

Instructions: This application must be completed in its entirety. All information is subject to verification. Any omissions or erroneous statements may be cause for rejection of this application, removal from eligibility, or discharge from employment. Please type or print in ink. If, because of a disability, you need assistance completing this application, please notify the Township Office at 724,265,3680.

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		Applicant Informa	ation			
Position applied for:			☐ Full-Time	☐ Part-Tii	me	
Name: Last	Last First			Middle		
Address:		City	State	Zip		
Length of Residence:		E-mail:				
Cell Phone:			Home Phone:			
Driver's License Number/State: Social Security Number:						
Are you at least 18 year		☐ Yes ☐ Yes	☐ No ☐ No			
At the time of hire, will you be able to demonstrate that you are legally authorized to work in the United States? (Proof of authorization will be required upon employment.)				☐ Yes	☐ No	
Have you ever been employed by West Deer Township?				☐ Yes	☐ No	
Dates:	Department:	Posi	tion:			
Do you have friends or	wnship?	☐ Yes	☐ No			
If yes, state name & rela	itionship					
May we contact your c If no, please identify son	or your current	☐ Yes	☐ No			
employer whom we may contact. Name: Phone Num				·		
Can you work:	Eve	enings?		☐ Yes	☐ No	
Nights?				☐ Yes	☐ No	
Weekends?				□ Ves	□ No	

			E	duc	ation			
Last High School Attended Name:		Highest grade completed: (mark one)			npleted:	Do you have a High School Diploma or G.E.D. certificate?		
Location:		9	10	11	12	☐ Yes ☐	No	
Colleges, universities, tra	de or te	chnica	al schools	or	apprenti	ceship program	ns:	
Name		Location yea			umber of onths attended	Degree, credits, certificates or licenses earned		
				Mili	tary			
Branch of Service:		Length of Service:		Rank at Separation:				
Specialized Training:								
			Other (	Qua	lification	S		
Describe the types of equipment you are capable of operating (machines, vehicles, computers, etc.).  List any trade, professional or skills certificates you hold.								
Summarize special skills, abilities or experiences which qualify you for this position.								
Background								
Have you ever been convicted of a crime other than a traffic violation? ☐Yes ☐No								
If yes, explain:								
NOTE: Criminal convictions are not necessarily a bar to employment; all relevant circumstances will be considered.								

	Employment History						
List all employment for the past ter	ı years, begi	inning wi	th current or	most recent position	1.		
Employer:							
Address:							
City:	State:			ZIP:			
Supervisor's Name:			Supervisor's Phone Number:				
Position:			ng? From:	To:			
Description of Duties:			Reason for Leaving:				
Hourly Rate/Salary: Starting: Ending:							
Will this supervisor/employer give a good job reference? If no, explain					☐ Yes	☐ No	
Were you:		_			☐ Yes		
Discharged or asked to resign by this employer? Ever disciplined (given a written warning, suspended, denied a pay increase,						∐ No	
etc.) by this employer? Ever counseled or warned about excessive absenteeism or tardiness by this					∐ Yes	∐ No	
employer?  If yes to any of the above, please explain					☐ Yes	∐ No	
Employer:							
Address:							
City:	State: ZIP:		ZIP:				
Supervisor's Name:	sor's Name: Super			ervisor's Phone Number:			
Position:			How long? From: To:				
Description of Duties:			Reason for Leaving:				
Hourly Rate/Salary: Starting: Ending:							
Will this supervisor/employer give a good job reference? If no, explain:					☐ Yes	☐ No	
Were you:  Discharged or asked to resign by this employer?  ☐ Yes ☐ No							
Ever disciplined (given a written warning, suspended, denied a pay increase, etc.) by this employer?					□ No		
Ever counseled or warned about excessive absenteeism or tardiness by this employer?				☐ Yes	□ No		
If yes to any of the above, please explain:							

If you need additional space, please continue on a separate sheet of paper.

References						
Please list three references other than former employers or relatives						
Name/Address:	Phone Number:	Relationship:				
	rtification, Authorization and Agreeme					
"I certify that the information supplied by me on this application form is true and complete, and does not contain any falsifications, omissions, or concealments of material fact. I authorize West Deer Township to investigate the veracity of this information and of any other information I may supply during a pre-employment interview. I further authorize every school, employer, person, and agency I identified in this form to release any and all verifying information West Deer may solicit. I further authorize West Deer Township to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in a criminal history records report, West Deer will so advise me.  I hereby release all law enforcement agencies, my former employers, all educational institutions and programs,						
their representatives and agents, and every other person identified by me on this form from liability for any damage or injury to me arising out of the release of information requested by West Deer Township.						
I understand and agree that West Deer Township's acceptance of this employment application does not constitute any promise, express or implied, that I will be hired. I further understand that West Deer does not guarantee anyone employment for any specific length of time. I therefore agree that, if I am hired, my employment may be terminated by by West Deer at any time within the constraints of any federal, state, or local law, and/or any existing and applicable bargaining agreements.						
I further understand and agree that any offer of employment West Deer Township may make to me (and, if I am hired, my continued employment) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and may be contingent on my passing a pre-employment substance abuse screen and a pre-employment health examination if requested. I understand that failure to pass required substance abuse screens or health examinations may result in the withdrawal of an offer of employment.						

I certify that I am not a party to any contract or other obligation which would limit, interfere with, or restrict my ability to work for West Deer Township in any way.

I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form."

Signature of Applicant:	Date:

West Deer Township 109 East Union Road Cheswick, PA 15024 724.265.3680 Revised 1/29/2016