

# APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_ Name: \_\_\_\_\_  
LAST FIRST MI

Position applying for: \_\_\_\_\_

Department: \_\_\_\_\_

Full-Time       Part-Time       Summer

*Thank you for your interest in employment opportunities with Upper Paxton Township. Please adhere to the following to submit an application:*

- The application must specify the position for which you are applying.
- A separate application must be fully completed and printed by hand or typewritten for each position for which you are applying.
- Please review minimum qualifications for the position for which you are applying.

**Address:** Chairman, Board of Supervisors  
**Street Address:** Upper Paxton Township Municipal Building  
506 Berrysburg Road  
Millersburg, PA 17061

◆ Optional – While an application can be submitted without a resume, including a resume provides the opportunity for you to state your skills, qualifications and experiences in an expanded format.



**PERSONAL INFORMATION**

*(Include any former names you used that will be necessary to verify previous employment and education.)*

|   |   |       |          |
|---|---|-------|----------|
| Name  | Social Security Number  |       |          |
| Street Address  | City  | State | Zip Code |
| Home Phone  | Business Phone  |       |          |
| If you are under 18 years of age, can you provide required proof of eligibility to work? <input type="checkbox"/> Yes <input type="checkbox"/> No | Are you authorized to work in the United States?<br><input type="checkbox"/> Yes <input type="checkbox"/> No (You will be required to furnish documents providing identity and eligibility to work in the U.S. if you are extended a job offer) |       |          |

**GENERAL INFORMATION**

|  |   |
|--|---|
| Date available for work _____<br>What is desired salary range? | Have you previously worked for Upper Paxton Township? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, when? In what department? In what capacity? |
|--|---|

Do/does any member(s) of your immediate family work for Upper Paxton Township? \_\_\_\_\_ "Immediate family" includes one's mother, father, sister, brother, spouse, son, daughter, grandmother, grandfather. If "yes," please complete the following:

Name of Relative \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

Department/Position where Relative is Employed \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor?:  Yes  No

If yes, describe fully the criminal conviction(s), list the nature of the offense and when the offense occurred. Record of conviction does not automatically disqualify applicant from employment consideration. Applicants applying for certain positions may be asked to provide additional information on summary offenses and traffic violations.

Have you ever been discharged from a job? If yes, explain fully

Yes  No \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

Name & Location of High School Last Attended. Did you Graduate from High School or Receive GED?  Yes  No

| Name & Location of College(s), University (ies), Technical, Graduate or Other Schools | Course |            | Grade Average          |
|---|--------|------------|------------------------|
|   | Major  | Grade Avg. | Specify Degree Awarded |
|   |        |            |                        |
|   |        |            |                        |
|   |        |            |                        |

**PROFESSIONAL LICENSES AND/OR CERTIFICATES (Including CDL)**

|      |              |             |         |     |              |
|------|--------------|-------------|---------|-----|--------------|
| Type | State Issued | Date Issued | Expires | No. | Verification |
| Type | State Issued | Date Issued | Expires | No. | Verification |

|  |                                   |
|--|-----------------------------------|
| Have your professional licenses and/or certificates Ever been suspended, revoked or placed on probation?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | If yes, when and for what reason? |
|--|-----------------------------------|

Do you possess a valid driver's license not under suspension? \_\_\_\_\_

State of Issue \_\_\_\_\_ Expiration Date \_\_\_\_\_ Driver's License # \_\_\_\_\_

\*Upper Paxton Township seeks only information on licenses and/or certificates that are relevant to the position(s) the applicant is seeking to obtain.

**SPECIALIZED SKILLS****COMPUTER SKILLS** Type \_\_\_\_\_ W.P.M Access  Excel Bookkeeping  Dictaphone Word  Other \_\_\_\_\_**EMPLOYMENT HISTORY**

**YOU MUST COMPLETE THIS SECTION OF THE APPLICATION** (*a resume may be attached in addition to providing the requested information.*) **START WITH PRESENT OR LAST JOB.**

|  |                                  |   |
|--|----------------------------------|---|
| From:<br><br>Mo. ____ Yr. ____<br><br>To:<br><br>Mo. ____ Yr. ____ | Firm Name & Address, City, State |   |
|  | Supervisor's Name/Title          | Phone Number  |
|  | Position Held                    | Starting Salary      Final Salary<br>\$ _____      \$ _____ |
|  | Responsibilities:                | Reason for Leaving:   |
| From:<br><br>Mo. ____ Yr. ____<br><br>To:<br><br>Mo. ____ Yr. ____ | Firm Name & Address, City, State |   |
|  | Supervisor's Name/Title          | Phone Number  |
|  | Position Held                    | Starting Salary      Final Salary<br>\$ _____      \$ _____ |
|  | Responsibilities:                | Reason for Leaving:   |
| From:<br><br>Mo. ____ Yr. ____<br><br>To:<br><br>Mo. ____ Yr. ____ | Firm Name & Address, City, State |   |
|  | Supervisor's Name/Title          | Phone Number  |
|  | Position Held                    | Starting Salary      Final Salary<br>\$ _____      \$ _____ |
|  | Responsibilities:                | Reason for Leaving:   |
| From:<br><br>Mo. ____ Yr. ____<br><br>To:<br><br>Mo. ____ Yr. ____ | Firm Name & Address, City, State |   |
|  | Supervisor's Name/Title          | Phone Number  |
|  | Position Held                    | Starting Salary      Final Salary<br>\$ _____      \$ _____ |
|  | Responsibilities:                | Reason for Leaving:   |

**ADDITIONAL INFORMATION**

Please include any additional information, volunteer work, school activities or training received that is relevant to the position for which you are applying.

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**EMPLOYMENT HISTORY**

List three supervisors, instructors or other individuals who can evaluate your work performance. (Do not list friends or relatives)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Number (including area code)

\_\_\_\_\_  
Telephone Number (including area code)

\_\_\_\_\_  
Name

May we contact your current employer at this time?

\_\_\_\_\_  
Address

YES  NO

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Telephone Number (including area code)

***PLEASE READ CAREFULLY BEFORE SIGNING***

I swear that this application and any and all documents to supplement or support it contain no falsifications or misrepresentations, nor do they omit or conceal any material facts. I swear that all information provided by me is true and complete to the best of my knowledge. I further acknowledge that the discovery, at any time, of any falsification, misrepresentation, omission, or concealment will result in my disqualification from consideration for employment or, if employed by the Township of Upper Paxton, in my dismissal form employment.

Further, I hereby consent to any lawful valid test, screen, examination or background investigation which the Township of Upper Paxton may require of all applicants for similar employment. I understand that this investigation may include inquiries to any or all current and former employers, whether or not cited by me on my application; references cited by me on my application; other person(s) who may have knowledge of my suitability for employment I seek; and criminal background checks.

I understand that any employment will be on a six month probationary basis. Any individual who is hired may voluntarily leave employment upon proper notice and be terminated by the Township for any reason. I understand that any oral or written statements to the contrary are hereby expressly disavowed and should not be relied upon by any prospective or existing employee.

Employment with the Township is based strictly upon the qualifications of the individual as related to the work requirements of the position. This criteria is applied without regard to sex, color, religion, national origin, age, disability, handicap or any other non job-related factors.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

*The Township of Upper Paxton is an Affirmative Action/Equal Opportunity Employer*