

TOWNSHIP OF EAST COCALICO EMPLOYMENT APPLICATION

An Equal Opportunity Employer

INSTRUCTIONS: Please fill out the following employment application form completely and accurately. Every one of these sections must be completed in order for the Township to accept the Application as complete. Print (**do not type**) an answer to every question. If a particular question does not apply to you, so state with N/A. If space available is insufficient, use reverse side and proceed with the number of the referenced block. Do not misstate or omit material fact since the statements made herein are subject to verification to determine your qualifications for employment. *Resumes may be attached, but should not be substituted for completing this application.*

SECTION I: PERSONAL INFORMATION

| | | | |
|-----------|------------|----------------|------------------------|
| LAST NAME | FIRST NAME | MIDDLE INITIAL | SOCIAL SECURITY NUMBER |
|-----------|------------|----------------|------------------------|

| | | | | |
|-----------------------|--------|------|-------|-----|
| PRESENT HOME ADDRESS: | STREET | CITY | STATE | ZIP |
|-----------------------|--------|------|-------|-----|

HOME PHONE NUMBER

WORK PHONE NUMBER

Are you at least 18 years of age? YES / NO
(If you are under the age of 18, a work permit may be required)

SECTION II: WORK PREFERENCE

Please describe in one or two sentences the nature of work and the position in which you are interested.

| | | |
|------------------------|-------------------------|----------------------|
| Are you interested in: | Full-time work _____ | Temporary work _____ |
| | Part-time work _____ | Seasonal work _____ |
| | Intermittent work _____ | No Preference _____ |

Will you accept salary range as advertised? _____ YES _____ NO

Date available to start work with the Township: _____

SECTION III: EMPLOYMENT HISTORY

Beginning with your most recent job, list your work history for the past ten years.

1) _____ Dates Employed: _____ Your Job Title:
Employer's Name From: _____ Beginning: _____
_____ To: _____ Ending _____
Street Address/City/State/Zip
_____ Your Salary:
Phone Number Beginning \$ _____
Ending \$ _____
Supervisor's Name

Describe your duties, responsibilities and authority for position(s) held:

Describe your reason(s) for leaving:

2) _____ Dates Employed: _____ Your Job Title:
Employer's Name From: _____ Beginning: _____
_____ To: _____ Ending _____
Street Address/City/State/Zip
_____ Your Salary:
Phone Number Beginning \$ _____
Ending \$ _____
Supervisor's Name

Describe your duties, responsibilities and authority for position(s) held:

Describe your reason(s) for leaving:

SECTION III:

EMPLOYMENT HISTORY (CONTINUED)

3) _____ Dates Employed: _____ Your Job Title: _____
Employer's Name From: _____ Beginning: _____

_____ To: _____ Ending _____
Street Address/City/State/Zip

_____ Your Salary:
Phone Number Beginning \$ _____
Ending \$ _____

_____ Supervisor's Name

Describe your duties, responsibilities and authority for position(s) held:

Describe your reason(s) for leaving:

4) _____ Dates Employed: _____ Your Job Title: _____
Employer's Name From: _____ Beginning: _____

_____ To: _____ Ending _____
Street Address/City/State/Zip

_____ Your Salary:
Phone Number Beginning \$ _____
Ending \$ _____

_____ Supervisor's Name

Describe your duties, responsibilities and authority for position(s) held:

Describe your reason(s) for leaving:

SECTION III:

EDUCATION PROFILE

A. List all high schools, vo-technical schools and colleges attended:

| NAME | CITY/STATE/ZIP | YEARS COMPLETED | GRADUATED YES / NO |
|-------|----------------|--------------------|-----------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Major and Minor Courses:

| | | |
|-------|-------|-------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |

B. Other accredited schools or training (trade, vocation, military). List subjects studied, certificate(s) earned, and any other pertinent data.

| |
|-------|
| _____ |
| _____ |
| _____ |

SECTION V:

SPECIAL QUALIFICATIONS AND SKILLS

A. List any special skills you possess, machines and equipment you can use and any licenses you hold. (For example, vehicle inspection mechanic, scientific or professional devises, mechanics license, heavy equipment operations (specific types), welding, computers literary, landscaping, etc.):

| |
|-------|
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |
| _____ |

B. Foreign language skills: Enter language and indicate fluency:

| |
|-------|
| _____ |
| _____ |
| _____ |

SECTION VI:

MILITARY STATUS

Yes No

Have you served in and are you a veteran of the U.S. Armed Forces? _____

A. While in the military service were you ever convicted for any crime Graded as a misdemeanor or felony? If yes, give detailed information On charges and actions taken. _____

B. Are you presented a member of a U.S. Reserve or State Guard organization? If yes, complete the following: _____

Grade and Service No.: _____

Service and Component: _____

Organization and Station or Unit and Address: _____

Indicate reserve obligation, if any: _____

SECTION VII:

BACKGROUND INFORMATION

A. CONVICTION OF CRIME: Have you ever been convicted of a misdemeanor, felony, or greater criminal violation? (YES / NO) If yes, state violation, court of jurisdiction, and date of conviction.

B. EMPLOYMENT DISCHARGE: Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? (YES / NO) If yes, state reason:

C. CHARACTER REFERENCES: List three character references. (Do not list relatives, former employers, or persons living outside the United States.)

| NAME | ADDRESS | HOME PHONE | WORK PHONE | YEARS KNOWN |
|------|---------|------------|------------|-------------|
|------|---------|------------|------------|-------------|

D. PROFESSIONAL REFERENCES: List only references who have definite knowledge of your qualifications for the position of application:

| NAME | ADDRESS | HOME PHONE | WORK PHONE | YEARS KNOWN |
|------|---------|------------|------------|-------------|
|------|---------|------------|------------|-------------|

SECTION VIII:

MISCELLANEOUS

The following information will be used only if it is directly related to the classification/position for which you are applying.

- 1. If listed as a primary job requirement, are you willing and able to secure a Pennsylvania Motor Vehicle Operator’s License and/or a Commercial Drivers License? YES NO
- 2. Can you perform the primary job requirements of the specific job for which you are applying with or without accommodations? YES NO
- 3. Have you previously filed an application with the Township / Authority? YES NO
If yes, provide year and position or Department for which you applied:
YEAR _____ POSITION / DEPARTMENT _____
- 4. Have you previously been employed with the Township / Authority YES NO
If yes, provide dates of employment and position:
DATES: FROM _____ TO _____
POSITION / DEPARTMENT _____

5. READ CAREFULLY AND CHECK APPROPRIATE BOX:

Applicants for various positions may be required to have a background and/or criminal history check:

_____ I authorize a background and/or criminal history check.

_____ I DO NOT authorize a background and/or criminal history check.

- 6. **I solemnly swear that all of the information furnished in the Employment Application, and supplements thereto, is true, accurate and complete to the best of my knowledge. I understand that any misrepresentation or falsification of the information provided may lead to withdrawal of an employment offer or termination following employment.**

I hereby authorize the employers, schools, and other references names in this application to provide information regarding me and to release personnel, academic and other records concerning me.

APPLICANT NAME (print)

SIGNATURE OF APPLICANT

DATE



EAST COCALICO TOWNSHIP POLICE DEPARTMENT

100 Hill Road, Denver, Pennsylvania 17517

Telephone: (717) 336-1725 ♦ Fax: (717) 336-1737

BACKGROUND CHECK WAIVER

East Cocalico Township is hereby authorized to make any investigation of my personal references and any other relevant data, including, but not limited to financial, credit or other personal records through any source (including, but not limited to, friends, neighbors, police departments, any government unite, whether federal, state or local). I understand that the answers of those persons contracted by the township or it's representative shall not be available for review. The Township or it's representative may, if it so chooses, request additional personal references, if, in it's sole discretion, deems additional information relevant.

Applicant Name (print)

Applicant Signature

Date

*Serving the Communities of
East Cocalico Township ♦ West Cocalico Township ♦ Adamstown Borough ♦ Denver Borough*