YORK TOWNSHIP 190 Oak Road Dallastown, PA 17313 (717) 741-3861

Application for Employment (Please Print)

| | ams, services and employn interview process should i | | | | ble accommodation to |
|--|---|--|-----------------------|----------------------------|---------------------------------------|
| Please submit compl | leted application to HR@ | YorkTownshipPA.gov or | in person at 190 | Oak Rd, Dallastown | ı, PA |
| Position(s) applied for | or | |] | Date of application _ | // |
| Referral Source | Advertisement | Employee | Relative | Government En | nployment Agency |
| | Walk-in | Private Employ | ment Agency | Other | |
| | Name of source (if app | plicable) | | | |
| NAME | | | | | |
| LAST | | FIRST | | | MIDDLE |
| ADDRESS | | | | | |
| STREET | | CITY | | STATE | ZIP CODE |
| TELEPHONE # | | CELL# | E-M | AIL | |
| If you are under 18 a If no, please explain Have you submitted | an application for any po | u furnish a work permit | ? p before?y | /esno If ye | |
| - | employed by York Town | | | - | |
| Type of employment Are you available to Will you travel if job | | ePart-time _ no Evenings?y yesno | Temporary esno Wee | Seasonal ekends?yes | |
| Have you ever been | bonded? | | | | yesno |
| Have you ever pled ' | 'guilty" or "no contest" | to, or been convicted of | a crime? | | yesno |
| If yes, please provide | e date(s) and details | | | | |
| Are there any crimin | al charges pending again | nst you at this time? | | | yesno |
| If yes, please provide | e date(s) and details | | | | |
| | questions does not constitute a a applied for will be taken into | | nt. Factors such as t | he date of the offense, se | riousness and nature of the violation |

Driver's license number ______ State ____ Class ____ Endorsements _____ CDL ____yes _____no

AN EQUAL OPPORTUNITY EMPLOYER

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

| Employer | Telephone # | Dates Employed | Summarize the type of work performed |
|--|-------------|--------------------|--------------------------------------|
| | | From To | and job responsibilities |
| Address | | | |
| Starting Job Title/Final Job Title | | Starting Hourly | |
| | | Rate/Salary | |
| Immediate Supervisor and Title | | \$ Per | |
| | | | |
| Reason for Leaving | | Final Hourly | |
| | | Rate/Salary | |
| May we contact for reference? \Box yes \Box no | a 🗆 later | \$ Per | |
| way we contact for reference. | | | |
| Employer | Telephone # | Dates Employed | Summarize the type of work performed |
| | | From To | and job responsibilities |
| Address | | | |
| Starting Job Title/Final Job Title | | Starting Hourly | |
| | | Rate/Salary | |
| Immediate Supervisor and Title | | \$ Per | |
| | | | |
| Reason for Leaving | | Final Hourly | |
| | | Rate/Salary | |
| | | \$ Per | |
| May we contact for reference? yes no | □ later | | |
| Employer | Telephone # | Dates Employed | Summarize the type of work performed |
| | | From To | and job responsibilities |
| Address | | | |
| | | Starting Hourly | |
| Starting Job Title/Final Job Title | | Rate/Salary | |
| Immediate Supervisor and Title | | | |
| Immediate Supervisor and Title | | \$ Per | |
| eason for Leaving | | Final Hourly | |
| | | Rate/Salary | |
| | | \$ Per | |
| May we contact for reference? yes no | | | |
| Employer | Telephone # | Dates Employed | Summarize the type of work performed |
| | 1 | From To | and job responsibilities |
| Address | | | |
| | | | |
| Starting Job Title/Final Job Title | | Starting Hourly | |
| | | Rate/Salary | |
| Immediate Supervisor and Title | | \$ Per | |
| | | Final Hourly | |
| Reason for Leaving | | | 1 |
| Reason for Leaving | | | |
| Reason for Leaving | | Rate/Salary \$ Per | |

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for

which you are applying. Please include computer and office skills and any machinery that you are trained in operating.

Please attach any additional information if necessary.

Educational Background

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any.

D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

| A. School | B. # yrs | C. Degree/Diploma | D . GPA / Rank | E. Major | F. Minor |
|-----------|-----------------|-------------------|-----------------------|----------|----------|
| | | | | | |
| | | | | | |
| | | | | | |

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

| Telephone Number | # of years known |
|------------------|------------------|
| | |
| | |
| | |
| - | Telephone Number |

Additional Information

List professional, trade, business or civic associations and any offices held. Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other protected status.

Please attach any additional information if necessary.

List any additional information you would like us to consider.

Please attach any additional information if necessary.

APPLICANT STATEMENT

I certify that all information I have provided (including additional information as attached) in order to apply for and secure work with York Township is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (1) cancel further consideration of this application, or (2) immediately discharge me from the Township's service, whenever it is discovered.

I expressly authorize, without reservation, the Township, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the Township, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the Township does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 90 days. At the conclusion of that time, if I have not heard from the Township and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the Township reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the Township is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the President of the York Township Board of Commissioners.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

| Signature of Applicant Da | ate | / | / | / |
|---------------------------|-----|---|---|---|
|---------------------------|-----|---|---|---|

- - Township Use Only - -

| Interviewed By: | | Date |
|-----------------|------------|-------|
| Position | Department | |
| Start Date | Rate | Hours |