



**West Norriton Township
1630 W. Marshall Street
Jeffersonville, PA 19403
610 631-0450**

APPLICATION FOR EMPLOYMENT

It is the policy of West Norriton Township to provide opportunities for employment, training, compensation, promotion and other conditions of employment, without regard to race, color, religion, national origin, sex, age, veteran status or handicap.

Please answer all of the following questions carefully and to the best of your ability.

Print Name _____ Date of Application _____
 Last First Middle

Address _____
 Street City State Zip

Telephone _____
 Home Business

Email _____ Social Security Number _____

Do you have a valid driver's license? Yes _____ No _____

State of issue _____ License # _____

EMPLOYMENT DESIRED

Position desired _____ Date available _____

Are you available to work? Full-time _____ Part-time _____

EDUCATION

Education	Name & Location of School	Major	Diploma/ Degree
High School			
College/Univ			
College/Univ			
Other			

Were you ever employed at West Norriton Township or the Jeffersonville Golf Club?

Yes _____ No _____ If Yes - Date _____ Position held _____

WORK HISTORY

May we contact your present employer? Yes _____ No _____

Name and Address of Employer	From	To	Major Duties	Reason for Leaving	Salary
Telephone ()					

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Telephone ()					

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Telephone ()					

Name and Address of Employer	From	To	Major Duties	Reason for Leaving	Salary
Telephone ()					

U.S. MILITARY SERVICE

Were you in the U. S. Armed Forces? Yes _____ No _____

Branch _____ Dates: From _____ to _____

Final rank _____ Type of discharge _____

Are you a member of the Reserves? Yes _____ No _____

REFERENCES

List people who may be contacted for an appraisal of your professional abilities and work performance. Students should include faculty. Do not include personal references.

Name	Occupation	Professional Relationship	Address	Telephone #

MISCELLANEOUS

Are you over 18 years of age? Yes _____ No _____

Can you, after employment, submit verification of your legal right to work in the U.S.? Yes _____ No _____

Do you have the legal right to remain permanently in the U.S.? Yes _____ No _____

Have you been convicted of a felony in the past five years? Yes _____ No _____

APPLICANT’S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I give the Employer the right to investigate all references and to obtain a consumer credit report for verification purposes. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand that employment at the Township is “at will” and the Township or I can terminate the employment relationship at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

Date _____

Applicant’s Signature _____

EMPLOYMENT INQUIRY RELEASE

In connection with my application for employment, I understand that investigative inquires on my background, in accordance with Fair Credit Reporting Act and all state and federal laws, are to be made on me, including information as to my personal character, abilities, work habits, mode of living, residency, immigration status, general reputation, performance, experience, and other qualities pertinent to my qualifications for employment, including reasons for termination of past employment.

I understand that the prospective employer may make inquiries, including but not limited to my worker's compensation history, consumer credit history, education, professional licensing, criminal history and driving history. Furthermore, I understand that the prospective employer may request this information from various federal, state and other agencies that maintain records concerning my past driving history, credit history, criminal history, military history, civil and other experiences, as well as claims involving me in the files of insurance companies.

I understand that information regarding my worker's compensation history is for the purpose of making certain that I am not hired for a position or assigned a job function that could aggravate a previous injury. I further understand that in compliance with the Americans With Disabilities Act, my worker's compensation history will only be investigated by prospective employer after a conditional offer of employment has been extended to me.

I understand that according to the Fair Credit Reporting Act, I am entitled to know if employment is denied because of information obtained by my prospective employer from a Consumer Reporting Agency. Upon written request, I will be informed whether an investigative consumer report was requested and will be given full information as to the nature and scope of this investigation, as well as the name of the reporting agency or sources of information.

I authorize without reservation, any party (including, but not limited to, employers, law enforcement agencies, state agencies, institutions and private information bureaus or repositories) contacted by prospective employer to furnish any or all of the above-mentioned information. In addition, I hereby release the prospective employer from any and all liability for damages arising from the investigation and disclosure of the requested information. I further release and discharge all liability from all companies, agencies, officials, officers, employees and other persons, who, in good faith, provide to prospective employer the above-mentioned information as requested, in order to successfully complete a background investigation for my application of employment. I will allow a photocopy of this authorization to be as valid as the original.

PRINT FULL NAME _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

CURRENT ADDRESS _____

CITY/STATE/ZIP _____

Signature _____

Date _____

Date of Birth is being requested only for the purpose of identification in obtaining accurate retrieval of records, and will not be used for discriminatory purposes.