

# WEST LAMPETER TOWNSHIP

## APPLICATION FOR EMPLOYMENT

An equal opportunity employer

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LAST NAME

FIRST

MIDDLE INITIAL

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PRESENT ADDRESS (STREET, CITY, STATE, ZIP)

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TELEPHONE NUMBER (DAY)

(EVENING)

EMAIL ADDRESS

POSITION OR TYPE OF WORK FOR WHICH YOU ARE APPLYING: \_\_\_\_\_

PLEASE CHECK PREFERRED STATUS:

Full-time  Part-time  Temporary  Seasonal  No Preference  Other : \_\_\_\_\_

DATE AVAILABLE TO START: \_\_\_\_\_

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Are you over the age of 18?  YES  NO If no, state your age: \_\_\_\_\_

Are you willing to work overtime, if necessary?  YES  NO

Can you perform the essential duties of the job for which you are applying, with or without reasonable accommodation?  
 YES  NO

Have you ever been convicted of a crime other than a minor traffic offense or are there charges presently pending against you for any crime other than a minor traffic offense? If yes, state the nature of the offense, date, city and state:

\_\_\_\_\_

Disclosure of a criminal record will not necessarily disqualify you for employment consideration. Each offense will be evaluated on its own merit with consideration for job duties which you will be performing.

During the past ten years have you ever been involved in any work-related incident(s) which caused damage to facilities, equipment, property, or other persons?  YES  NO

Do you have the legal right to work in the United States?  YES  NO

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### RECORD OF EDUCATION

(LIST SCHOOLS FROM WHICH YOU OBTAINED A DEGREE OR CERTIFICATION)

SCHOOL NAME	LOCATION	COURSES OF STUDY	DATES	DEGREE/CERT.
High School				
College				
Graduate School				

**RECORD OF PREVIOUS EMPLOYMENT**  
 (PROVIDE INFORMATION ON THE PREVIOUS 10 YEARS OF EMPLOYMENT. INCLUDE MILITARY SERVICE.)

PRESENT		MONTH / YEAR	POSITION AND DUTIES
Name		From	
Street Address		To	
City, State, Zip		Present salary	Reason for leaving:
Supervisor	Telephone Number ( )		

DOES YOUR PRESENT EMPLOYER KNOW YOU ARE SEEKING EMPLOYMENT ELSEWHERE? \_\_\_ YES \_\_\_ NO

MAY WE CONTACT YOUR PRESENT EMPLOYER? \_\_\_ YES \_\_\_ NO

PREVIOUS		MONTH / YEAR	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To Starting salary	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ( )		

NEXT		MONTH / YEAR	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To Starting salary	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ( )		

NEXT		MONTH / YEAR	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To Starting salary	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ( )		

If you are applying for a clerical position, indicate:		
Typing speed:	Computer literacy: ___ YES ___ NO	List Types / Programs:
Shorthand speed:	Word processing: ___ YES ___ NO	
	Spreadsheet: YES NO	

If you are applying for a Public Works position, indicate:		
Do you possess a Commercial Driver's License (CDL)? ___ YES ___ NO		
State:	Operator's number:	Expiration Date:
Has your Driver's License been suspended or revoked in the last 5 years? ___ YES ___ NO		
If yes, please explain:		
Please indicate most recent moving violation:		
Date:	Violation:	State of incident:

List specialized training courses or on-the-job training you have received :		
What type? Location?	Who provided training?	Dates of training?

**RECORD OF MILITARY SERVICE**

Have you served in the armed forces of the United States?  YES  NO

If yes, which branch(es):  Army  Navy  Marines  Air Force  National Guard / Reserves

Dates of Service: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

Dates of Service: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

Military Occupation(s): \_\_\_\_\_

Specialized Training: \_\_\_\_\_

Have you ever received a courts martial or dishonorable discharge?  YES  NO

If yes, please explain: \_\_\_\_\_

Are you currently serving in the National Guard or Reserve:  YES (Branch: \_\_\_\_\_)  NO

**AFFIRMATION OF ACCURACY  
BACKGROUND/REFERENCE CHECK AUTHORIZATION**

*PLEASE READ CAREFULLY:*

By signing below I affirm the information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, discharge from employment. I authorize the Township to verify and investigate, at its discretion, the information contained herein and make such further investigation as it deems proper with respect to my employment history, work habits, job performance, and educational background, whether same is of written record or not; and I authorize my employers to furnish such information, and release them from any damage on account of furnishing such information. I agree that a photocopy of this signed application shall have the effect of an original.

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Applicant's Signature)

**FOR TOWNSHIP USE ONLY**

INTERVIEWED?  YES  NO

REMARKS  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HIRED?  YES  NO      DATE OF HIRE \_\_\_\_\_      EMPLOYEE ID#: \_\_\_\_\_

JOB TITLE \_\_\_\_\_      HOURLY RT / SALARY \_\_\_\_\_      DEPARTMENT \_\_\_\_\_