



HILLTOWN TOWNSHIP
 PO Box 260
 13 W. Creamery Rd.
 Hilltown, PA 18927
 (215) 453-6000 www.hilltown.org

Application for Employment

Equal Opportunity/Affirmative Action Employer

Qualified applicants are considered for all positions without regard to race, color, religion, sex national origin, age, marital or veteran status, or the presence of non-job-related medical conditions or disability.

(Please Print)

Position(s) Applied For: _____ Date of Application: _____

Referral Source:

- Advertisement Employee Relative
 Walk-in Employment Agency Other

Name: of Source (if applicable): _____

Name: _____
Last Middle First

Address: _____
Street City State Zip Code

Telephone Number: (_____) _____ - _____ Email Address: _____

Driver's License Number (if required by job): _____ State: _____

Desired Salary: \$ _____ per _____ (hour, week, month, etc.)

Days/Hours Available to Work: _____ Earliest Start Date: _____

EMPLOYMENT HISTORY

List your last four (4) employers, assignments, or volunteer activities, starting with the most recent, including military experience. You may attach a resume or additional sheets. Explain any gaps in employment in the comments section below.

EMPLOYER	TELEPHONE NO:	DATES EMPLOYED		PRIMARY DUTES AND RESPOSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE				
SUPERVISOR & TITLE				
REASON(S) FOR LEAVING				
MAY WE CONTACT FOR REFERENCES ____ Yes ____ No ____ LATER <i>(Please give a date when we can contact employer)</i>				

EMPLOYER	TELEPHONE NO:	DATES EMPLOYED		PRIMARY DUTES AND RESPOSIBILITIES
ADDRESS		FROM	TO	
JOB TITLE				
SUPERVISOR & TITLE				
REASON(S) FOR LEAVING				
MAY WE CONTACT FOR REFERENCES ____ Yes ____ No ____ LATER <i>(Please give a date when we can contact employer)</i>				

EMPLOYER	TELEPHONE NO:	DATES EMPLOYED FROM TO		PRIMARY DUTES AND RESPOSIBILITIES
ADDRESS				
JOB TITLE				
SUPERVISOR & TITLE				
REASON(S) FOR LEAVING				
MAY WE CONTACT FOR REFERENCES ____Yes ____No ____LATER (Please give a date when we can contact employer)				

EMPLOYER	TELEPHONE NO:	DATES EMPLOYED FROM TO		PRIMARY DUTES AND RESPOSIBILITIES
ADDRESS				
JOB TITLE				
SUPERVISOR & TITLE				
REASON(S) FOR LEAVING				
MAY WE CONTACT FOR REFERENCES ____Yes ____No ____LATER (Please give a date when we can contact employer)				

COMMENTS: (Including explanation of any gaps in employment)

SKILLS & QUALIFICATIONS: (Summarize special skills & qualifications acquired from employment that may qualify you for work with Hilltown Township.

EDUCATION BACKGROUND

List the last three (3) schools attended, starting with the last one; List the number of years completed; Indicate the degree or diploma earned, if any. List the major and minor field of study, if applicable.

SCHOOL	YEARS COMPLETED	DEGREE/ DIPLOMA	MAJOR	MINOR

List other training/education/certificates or licenses you possess which are pertinent to the position: _____

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.

NAME	TELEPHONE NUMBER	BUSINESS/SCHOOL/PERSONAL

EMPLOYMENT QUESTIONS

(Please Complete the following)

If you are under 18, can you furnish a work permit? Yes No

Have you filed an application here before? Yes No Date: _____

Have you ever been employed here before? Yes No Date: _____

Do you have a relative employed by Hilltown Township? Yes No

Are you legally eligible for employment in this country? Yes No

(Proof of U.S citizenship or immigration status will be required upon hire)

Are you a Veteran? Yes No Branch: _____ From: _____ To: _____

(Proof of veteran's status will be required by submitting a copy of your DD214)

Date Available for Work? _____ / _____ / _____

Type of Employment Desired: Full Time Part Time Temporary Seasonal

Will you travel if job requires it? Yes No

Will you work overtime if required: Yes No

If required, will you undergo a pre-employment physical: Yes No

Have you ever been bonded: Yes No

Have you ever been convicted of a felony: Yes No

(Such conviction may be relevant if job related but does not bar you from employment)

If yes, please explain: _____

(Use back of page if necessary)

I CERTIFY THAT ALL INFORMATION ON THIS APPLICATION IS CORRECT. I FURTHER UNDERSTAND THAT ANY MISREPRESENTATION OR FALSE STATEMENTS ON THIS APPLICATION, OR IF EMPLOYED, MAY BE CAUSE FOR DISMISSAL.

SIGNATURE OF APPLICANT: _____ **DATE:** _____