

EAST WHITELAND TOWNSHIP

JOB ANNOUNCEMENT FORM

The Township is currently accepting applications for the following position: _____

If you are interested in applying for this position, please read the following information. If you need assistance with the application process, please notify the receptionist at the front desk of the administrative offices.

1. In order to be considered for employment, you must **complete the attached application form**. Your application may be rejected if information is incomplete or inaccurate.
2. Before you complete the application form, please **review the attached job description** to ensure you possess the requisite knowledge, skills and ability, to perform the job for which you are applying. As an equal opportunity employer, the Township will strive to provide reasonable accommodations for individuals with disabilities who would otherwise meet job requirements.
3. **Please sign the application form** and return it to the Township administrative office. You will be notified if an interview is requested by the Township. Due to the many applications received by the Township, it is not always possible to respond personally to every application received. However, you may call the administrative office of the Township at any time to inquire about the status of your application.
4. **It is the policy of the Township to accept employment applications only when an opening exists**. All applications will be kept on file for two years, or longer if the applicant is hired. Please feel free to contact the Township or check the website (www.eastwhiteland.org) at any time if you would like to inquire about other openings or complete another application.
5. Offers of employment are conditional on successful completion of a drug test, medical exam and a background check to ensure the candidate possesses the knowledge, skills and abilities to successfully meet job requirements.

Additional instructions or information (if applicable):

EQUAL EMPLOYMENT OPPORTUNITY POLICY

The Township provides equal employment opportunities to all employees and applicants for employment without regard to race, color, sex, national origin, age, physical or mental disability, or status as a Vietnam-era or special disabled veteran, in accordance with state and federal laws.

**EAST WHITELAND TOWNSHIP
APPLICATION FOR EMPLOYMENT**
An equal opportunity employer

LAST NAME	FIRST	MIDDLE INITIAL
PRESENT ADDRESS (STREET, CITY, STATE, ZIP)		
TELEPHONE NUMBERS (DAY) (EVENING)		
POSITION OR TYPE OF WORK FOR WHICH YOU ARE APPLYING:		
PLEASE CHECK PREFERRED STATUS: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Seasonal <input type="checkbox"/> No Preference <input type="checkbox"/> Other :		
DATE AVAILABLE TO START:		
Are you over the age of 18? <input type="checkbox"/> yes <input type="checkbox"/> no If <u>no</u> , state your age:		
Are you willing to work overtime, if necessary? <input type="checkbox"/> yes <input type="checkbox"/> no		
Can you perform the essential duties of the job for which you are applying, with or without reasonable accommodation? <input type="checkbox"/> yes <input type="checkbox"/> 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:		
<i>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.</i>		
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? <input type="checkbox"/> yes <input type="checkbox"/> no		
Do you have the legal right to work in the United States? <input type="checkbox"/> yes <input type="checkbox"/> no		
RECORD OF EDUCATION (LIST SCHOOLS FROM WHICH YOU OBTAINED A DEGREE OR CERTIFICATION)		
High School	Location	
College	Course of Study	Degree Received
Date Received		
Other Education		

RECORD OF PREVIOUS EMPLOYMENT (Use additional page if necessary)

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

PRESENT OR MOST RECENT EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

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

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

APPLICATION FOR EMPLOYMENT

Computer Operation: yes no
 Word processing: yes no
 Spreadsheet: yes no
 Other (Indicate) yes no

Provide example of work projects performed on computer which demonstrates skills:

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?	Who provided training?	Dates of training?	Location?

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.

 (Applicant's Signature)

 (Date)

RECORD OF PREVIOUS EMPLOYMENT (Additional Page)

Applicant Name:

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		

EMPLOYER		EMPLOYER DATES	POSITION HELD AND DUTIES PERFORMED
Name		From	
Street Address		To	
City, State, Zip		Ending salary	Reason for leaving:
Supervisor	Telephone Number ()		