#### MERCER COUNTY

# SPRINGFIELD

# **TOWNSHIP, EST 1805 =**

406 Old Ash Road Mercer PA 16137

Springfield Township is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color, religion, national origin, genetic status, ancestry, sex, non-job related disabilities or age. All information requested on this application form is solicited for the purpose of determining the abilities and skills required for proper job placement and to facilitate verification of the information requested.

#### **INSTRUCTIONS:**

This application must be completed in its entirety. All required documents must be attached. Please print in ink or type. If, because of disability you need assistance in completing this application form, please notify the Township.

Application for:	PLEASE CHECK ONE:	☐ FULL-TIME ☐	PART-TIME
NAME LAST	FIRST	MIDDLE	
STREET ADDRESS	CITY	STATE	ZIP CODE
PHONE NUMBER(S)			
Are you at least 21 years old?		YES NO	CON
Are you a United States citizen or authorized to work in the United States? (Proof of citizenship or Immigration status will be required upon employment)		YES NO	CONTROL NUMBER:
Have you ever had your driver's license suspended or revoked? (If yes, please explain on a separate piece of paper)		☐ YES ☐ NO	MBER
Do you claim a Veteran's preference?		☐ YES ☐ NO	"
May we contact your employer? If no, please identify someone familiar with your employer that we may contact.	our performance for your current	YES NO	
Name:	Phone #:		
Have you ever been convicted of a felon If yes, explain:		YES NO	

(Note) No applicant will be denied employment solely on the grounds of a criminal conviction. The nature of the crime, the date of the offense, the surrounding circumstances and the relevance of the offense to the position(s) applied for may be a factor in hiring. You will be notified if your conviction is a factor in deciding whether to hire you.

# **EMPLOYMENT HISTORY –** Use additional sheets, if necessary

List all employment for the past ten years, beginning w	ith current or most rece	nt position.		
Employer	Dates Employed			Job Title
	From:	To:		
			1	
Address			Description	of Duties
Supervisor's Name				
Supervisor's Phone number			Reason for	Leaving
•				J. J.
Hourly Rate/Salary			-	
Flourly Rate/Salary				
Starting: Ending:				
Will this supervisor give a good job reference?				'ES NO
If no, explain:				
			П,	/F0
Discharged or asked to resign by this employer?  Ever disciplined (given written warning, suspended, denied)	d a nav increase letc )h	w this amployar		ES NO NO
Ever counseled or warned about excessive absenteeism of				ÉS NO
IF year to say of the above whose				
IF yes to any of the above, please explain:				
_				
List all employment for the past ten years, beginning w	ith accurant as mant son	nt necition		
Employer	Dates Employed	nt position.		Job Title
, •	_	_		
	From:	To:		
Address			Description	of Duties
Supervisor's Name			-	
Supervisor's Phone number			Reason for	Leaving
•				3
Hourly Rate/Salary			-	
Starting: Ending:				
Will this supervisor give a good job reference?				'ES NO
If no, explain:				20
Dischanged as asked to realize the this secretary of				ES NO
Discharged or asked to resign by this employer?  Ever disciplined (given written warning, suspended, denied)	d a pay increase, etc) b	y this employer		ÉS NO NO
Ever counseled or warned about excessive absenteeism of				ES NO
If yes to any of the above, please				
explain:				

### **EDUCATION**

Colleges, Universities, Trade Schools, Tech Name  Location  OTHER QUAL  List and/or summarize any additional skills, qualifications or c	Number of years/months attended	Degree, Credits, Certificates or Licenses
Name Location  OTHER QUAL	Number of years/months attended	Degree, Credits, Certificates or Licenses
Name Location  OTHER QUAL	Number of years/months attended	Degree, Credits, Certificates or Licenses
	LIFICATIONS	
		u in this position.
		u in this position.
		u in this position.
List and/or summarize any additional skills, qualifications or c	ertificates that would assist you	u in this position.
		··
MILIT	ARY	
Branch of Service Length of Service	Rank at S	Separation
Reserve Requirements	Specialized Training	

## **REFERENCES**

Please list five references other than relatives or former employers		
Name / Address	Phone Number	Relationship
HE FOLLOWING DOCUMENTS MUST BE ATTACHED TO THIS A	PPLICATION;	
<ul><li>(1) Copy of a valid driver's license,</li><li>(2) Verification of Military Service</li><li>(3) Copy of any relevant certificates and additional training certificates</li></ul>		D-214),
CERTIFICATION, AUTHORIZATI	ON AND AGREEMENT	
"I certify that the information supplied by me on this application form is true ar concealments of material fact that may result in the rejection of my application	complete and does not contain any	
investigate the truth of this information and of any other information I may sup	ply during a pre-employment intervi	ew. I further authorize every
school, employer, person and agency identified by me on this form to release or them. I further authorize the Township to investigate my criminal history an		
and general reputation."		
"I hereby release all law enforcement agencies, my former employers, all edu identified by me on this application from any liability for any damage or injury		
Township."	o me ansing out of the release of h	normation requested by the
"I understand and agree that the Township's acceptance of this employment a	application does not constitute any p	promise, expressed and
implied, that I will be hired. I further understand that the Township does not gut therefore agree that, if I am hired, my employment may be terminated by either		
"I further understand that any offer of employment the Township may make to contingent upon my submission of evidence verifying that I am authorized to v	vork in the United States and may b	
and passing physical examinations, psychological examinations and drug test	s."	
"I certify that I am not a party to any contract or obligation which would limit, ir way."	terfere with or restrict my ability to	work for the Township in any
"I hereby acknowledge that I have read this section of the employment applica	ation and fully understand the mean	ing and effect of signing this
form."		-
O'marada	Date	
Signed:	Date:	