



# Sewickley Township Employment Application

THE TOWNSHIP OF SEWICKLEY IS AN EQUAL OPPORTUNITY EMPLOYER. ALL QUALIFIED APPLICANTS WILL BE CONSIDERED WITHOUT REGARD TO RACE, COLOR, RELIGION, NATIONAL ORIGIN, AGE, SEX, SEXUAL ORIENTATION, GENDER IDENTITY, DISABILITY, OR PREGNANCY. ALL INFORMATION REQUESTED ON THIS APPLICATION FORM IS SOLICITED FOR THE PURPOSE OF DETERMINING 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. PLEASE PRINT IN INK OR TYPE. IF YOU NEED ASSISTANCE IN COMPLETING THIS APPLICATION FORM BECAUSE OF A DISABILITY, PLEASE NOTIFY THE ADMINISTRATIVE OFFICE. (724) 466-7202 or [manager@sewickelytownship.org](mailto:manager@sewickelytownship.org)

POSITION BEING APPLIED FOR:

FULL TIME  PART TIME

Name LAST FIRST MIDDLE

HOME ADDRESS

PHONE EMAIL

Are you at least 18 years old?  YES  NO

Are you a United States citizen or authorized to work in the United States?  YES  NO  
(Successful applicants are required to verify citizenship or authorization to work in the U.S., as well as to provide documentation of identity of employment eligibility prior to employment.)

Have you ever been employed by Sewickley Township?  YES  NO

If yes, give the date range \_\_\_\_\_

May we contact your current employer?  YES  NO

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

Can you work evenings, nights and weekends if needed?  YES  NO

If no, which of the above are you not available \_\_\_\_\_

## EDUCATION

Do you have a high school diploma or G.E.D. certificate?  YES  NO

Last High School Attended \_\_\_\_\_  
Name

College, Universities, Trade or Technical Schools or Apprentices Programs:

| Name | Location | Years/<br>Months Attended | Degree, Credits,<br>Certificates or Licenses |
|------|----------|---------------------------|--|
|      |          |                           |  |
|      |          |                           |  |
|      |          |                           |  |
|      |          |                           |  |

**MILITARY**

Branch of Service \_\_\_\_\_ Length of Service \_\_\_\_\_ Rank at Separation \_\_\_\_\_

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

Are you seeking hiring preference under the Veterans' Preference Act?  YES  NO

If so, attach a copy of discharge or separation papers, DD Form 214, if any.

**SKILLS**

Describe the type of equipment you are capable of operating and/or computer programs used:

\_\_\_\_\_  
\_\_\_\_\_

List any relevant certificates or licenses you hold: \_\_\_\_\_

\_\_\_\_\_

Summarize special skills, abilities or experiences which apply to this position:

\_\_\_\_\_  
\_\_\_\_\_

**BACKGROUND**

Have you ever been convicted of, or pleaded guilty or no contest to any misdemeanor or felony?  YES  NO

If yes, please identify the violations that you were convicted of and provide the date and place of your conviction. Conviction will not necessarily disqualify an applicant from employment.

**EMPLOYMENT HISTORY**

| <u>Employer</u>   | <u>Dates Employed From/To</u> | <u>Job Title</u> |
|---|-------------------------------|------------------|
| <hr/>   |                               |                  |
| <u>Employer Address</u><br><hr/>  |                               |                  |
| <u>Supervisor's Name and Phone Number</u><br><hr/>  |                               |                  |
| <u>Job duties and reason for leaving;</u><br><hr/>  |                               |                  |
| Will this supervisor/employer give a good job reference? <input type="checkbox"/> YES <input type="checkbox"/> NO             |                               |                  |
| If no, explain _____  |                               |                  |
| Were you discharged or asked to leave by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO              |                               |                  |
| Were you ever suspended or given a written warning by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO |                               |                  |
| If yes to either of the prior two prior questions above, please explain: _____<br><hr/>                                       |                               |                  |

| <u>Employer</u>   | <u>Dates Employed From/To</u> | <u>Job Title</u> |
|---|-------------------------------|------------------|
| <hr/>   |                               |                  |
| <u>Employer Address</u><br><hr/>  |                               |                  |
| <u>Supervisor's Name and Phone Number</u><br><hr/>  |                               |                  |
| <u>Job duties and reason for leaving;</u><br><hr/>  |                               |                  |
| Will this supervisor/employer give a good job reference? <input type="checkbox"/> YES <input type="checkbox"/> NO             |                               |                  |
| If no, explain _____  |                               |                  |
| Were you discharged or asked to leave by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO              |                               |                  |
| Were you ever suspended or given a written warning by this employer? <input type="checkbox"/> YES <input type="checkbox"/> NO |                               |                  |
| If yes to either of the prior two prior questions above, please explain: _____<br><hr/>                                       |                               |                  |

| <u>Employer</u>  | <u>Dates Employed From/To</u> | <u>Job Title</u>   |
|--|-------------------------------|--|
| <hr/>  |                               |  |
| <u>Employer Address</u> <hr/>  |                               |  |
| <u>Supervisor's Name and Phone Number</u> <hr/>                                      |                               |  |
| <u>Job duties and reason for leaving;</u> <hr/>                                      |                               |  |
| <hr/>  |                               |  |
| Will this supervisor/employer give a good job reference?                             |                               | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| If no, explain _____ <hr/>   |                               |  |
| Were you discharged or asked to leave by this employer?                              |                               | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| Were you ever suspended or given a written warning by this employer?                 |                               | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| If yes to either of the prior two prior questions above, please explain: _____ <hr/> |                               |  |
| <hr/>  |                               |  |

**References**

Please list three references other than relatives for former employers:

| <u>Name/Address</u> | <u>Phone Number</u> | <u>Relationship</u> |
|---------------------|---------------------|---------------------|
| 1. _____            | _____               | _____               |
| 2. _____            | _____               | _____               |
| 3. _____            | _____               | _____               |

**CERTIFICATION, AUTHORIZATION AND AGREEMENT**

I certify that the information supplied by me on this application form and in my resume, if any, is true and complete and does not contain any falsifications, omissions, or concealments of material fact. I authorize Sewickley Township to investigate the truth of this information and of any other information I may supply during a pre-employment interview. I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information Sewickley Township may solicit from it or them. I further authorize Sewickley Township to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in criminal history records, Sewickley Township will so advise me.

I hereby release all law enforcement agencies, my former employers, all educational institutions and programs and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by Sewickley Township.

I understand and agree that **Sewickley Township's** acceptance of this application does not constitute any promise, expressed or implied, that I will be hired. I further understand that Sewickley Township does not guarantee anyone employment for any specific length of time. I therefore agree that, if I am hired, my employment may be terminated by either me or by Sewickley Township at any time with or without cause and without prior notice, except as may be required by law.

I further understand and agree that any offer of employment Sewickley Township may make me (and, if I am hired, my continued employment) will be contingent upon my submission of evidence verifying that I am authorized to work in the United States and may be contingent upon my taking and passing physical examinations and drug tests.

I certify that I am not a party to any contract or other obligation which would limit, interfere with or restrict my ability to work for Sewickley Township in any way.

I hereby acknowledge that I have read this section of the employment application and fully understand the meaning and effect of signing this form.

Signed \_\_\_\_\_ Date \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_  
(i.e. Indeed, newspaper, web site, friend, etc.)

For office use only;

Date Received \_\_\_\_\_