



UPPER UWCHLAN TOWNSHIP APPLICATION FOR EMPLOYMENT

*Each question must be answered in full.
Incomplete applications will not be considered.*

Upper Uwchlan Township is an equal opportunity/affirmative action employer. We are committed to providing equal employment opportunities to all team members and applicants without regard to race, religion, color, sex (including breast feeding and related medical conditions), gender, gender identity and expression, sexual orientation, national origin, ancestry, citizen status, uniform service member and veteran status, marital status, pregnancy, age, protected medical condition, genetic information, disability or any other protected status in accordance with all applicable federal, state and local laws. The information on this application is not solicited for, nor will it be used for, the purpose of unlawful discrimination.

PERSONAL INFO:

Name: _____
Last _____ First _____ Middle _____

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone: _____ Cell Phone: _____ Email: _____

List the job(s) you are applying for: _____ Date available to start: _____

First Choice: _____ Expected Salary: _____

Second Choice: _____ Expected Salary: _____

Availability: Full time _____ Part time: _____ Seasonal: _____

Have you previously applied to Upper Uwchlan Township for employment? Yes _____ No _____

If yes, list the date(s) of previous applications: _____

Relatives working at Upper Uwchlan Township: _____

Are you at least 18 years old? (If under 18, hire is subject to verification of legal age) Yes _____ No _____

If hired, can you provide proof that you are legally entitled to work in the U.S.? Yes _____ No _____

If not, what steps must be taken for you to begin employment lawfully?

Are you able to perform, with or without accommodations, the essential functions of the job for

which you are applying? Yes _____ No _____

If not, identify the essential function(s) of the job which you are unable to perform with or without accommodations:

EXPERIENCE & BACKGROUND

List the training, experience, education, or any other facts which particularly qualify you for the job(s) sought, including capabilities and licenses on-the-job-related equipment such as a motor vehicle or computer:

CURRENT AND PREVIOUS EMPLOYMENT

Please list the names of your present and previous employers in chronological order with current or last employer listed first.

Include all employers for the last 10 years or the most recent 3 employers, whichever is a longer period of time. Include part-time, seasonal and all other employment. If you need more space, use a separate sheet of paper. *DO NOT ANSWER "SEE RESUME."* Resumes will not be accepted in lieu of completed application.

I. Current or Last Employer		Job Title	
Address: Number and Street		City	State
Telephone Number(s)			
Supervisor's Name		Supervisor's Job Title	
Reason for Leaving			
Date Hired		Last Date Employed	
Describe Your Job Duties:			
Starting Pay Rate		Ending Pay Rate	

II. Employer		Job Title	
Address: Number and Street		City	State
Telephone Number(s)			
Supervisor's Name		Supervisor's Job Title	
Reason for Leaving			
Date Hired		Last Date Employed	
Describe Your Job Duties:			
Starting Pay Rate		Ending Pay Rate	

III. Employer		Job Title	
Address: Number and Street		City	State
Telephone Number(s)			
Supervisor's Name		Supervisor's Job Title	
Reason for Leaving			
Date Hired		Last Date Employed	
Describe Your Job Duties:			
Starting Pay Rate		Ending Pay Rate	

Have you ever been terminated or asked to resign from any job? Yes No

If yes, please explain circumstances (use a separate sheet of paper if necessary):

May we contact your current and past employer(s)? Yes No

If no, please explain:

EDUCATIONAL BACKGROUND

Education	Years Complete (Circle)	Degree Earned (Yes or No)	School Name & Location (City, State)	Course of Study	Describe Specialized Experience, Training, Skills and Extra Curricular Activities
High School	9 10 11 12				
College/ University	1 2 3 4				
Graduate/ Professional	1 2 3 4				
Trade or Correspondence					

OTHER RELEVANT EXPERIENCE

Describe other experience you have that is relevant to the job for which you are applying or list any job-related designations, certifications or courses completed that may be applicable to the position desired:

MILITARY

Have you served in the armed forces? Yes _____ No _____ Branch: _____

Duties, training while in armed forces that may contribute to your performance in the job applying for:

Have you ever been bonded? Yes _____ No _____ Refused a bond: Yes _____ No _____

Bonded for what job: _____

Reason for bond refusal? _____

DRIVING INFORMATION (Complete only if driving is an essential function of the job for which you are applying)

Do you have a valid driver's license? Yes _____ No _____

If yes, License No.: _____ State: _____ Expiration Date: _____

If you do not have a PA driver's license, why not? _____

Has your license ever been suspended or revoked? Yes _____ No _____

If yes, explain: _____

Do you have personal automobile insurance? Yes _____ No _____

If no, explain: _____

REFERENCES

List individuals (other than former employers and relatives) who have known you at least 2 years and whom we may contact:

Name: _____ Occupation: _____

Address: _____ Phone Number: _____

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Address: _____ Phone Number: _____

Name: _____ Occupation: _____

Address: _____ Phone Number: _____

I understand that this employment application and any other Township documents provided during the application process are not promises of employment. I understand that if I am hired, my employment will be at-will.

I certify that the information given by me on this application and during the interview process is true and complete in all respects, and I agree that if the information is found to be false, misleading, or unsatisfactory in any respect (in the Township's judgment) I will be disqualified from consideration for employment or subject to immediate dismissal if discovered after I am hired.

I understand this application will be considered active for a maximum of 180 days. If I wish to be considered for employment after that time, I understand that I must reapply. I further understand that separate applications are required for each position for which I wish to be considered.

Signature_____ Date_____