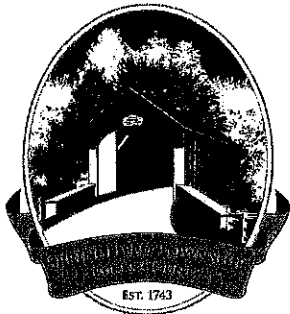


SPRINGFIELD TOWNSHIP JOB APPLICATION



Springfield Township, Bucks County is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, creed, religion, ancestry, age, sex, marital status, national origin, disability or handicap, or veteran status.

PERSONAL:

Name _____ Date _____
Last First Middle

Address _____
Number & Street City State Zip Code

Position Sought _____ Full Time ___ Part Time

Date Available _____ Salary Desired _____

Phone # _____ Email Address _____

Social Security Number _____

Are you over 18 years old? ___ Yes ___ No

Are you legally eligible for employment in the United States? ___ Yes ___ No
(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.

High School: No. of Yrs Completed (circle one) 1 2 3 4

Diploma: __ Yes __ No **G.E.D.:** __ Yes __ No

School(s) _____ City/State _____

College and/or Vocational School:

Number of Years Completed (circle one) 1 2 3 4

School(s) _____ City/State _____

Major _____ Degrees Earned _____

Other Training or Degrees:

School(s) _____ City/State _____

Course _____ Degree or Certificate Earned _____

PROFESSIONAL LICENSE OR MEMBERSHIP:

Type of License(s) Held _____

State of Pennsylvania License Number _____

License Expiration Date _____

Other Professional Memberships _____

Do you have a valid CDL? Yes _____ No _____ What type? _____

(You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.)

**This application for employment is good for ninety (90) days only.
Consideration for employment after ninety (90) days requires a new
application.**

QUESTIONS :

1. Are you available to work weekends and holidays? Yes No
2. Are you available to do emergency work on call? Yes No
3. Do you have any restrictions that would prevent you from working during certain time periods of the day, week, or month? Yes No
4. Do you have any transportation restrictions that would prevent you from getting to work during certain time periods of the day, week, or month? Yes No
5. Do you have any restrictions that would prevent you from working outside in all kinds of weather conditions such as rain, sleet, snow, and heat? Yes No
6. Do you have any restrictions that would prevent you from performing all types of physical labor, including pick work, shovel work, sewer cleaning, snow removal, and heavy lifting? Yes No
7. Have you ever applied or worked for Springfield Township in the past? Yes No

SKILLS :

Office

Typing Microsoft Word Excel Powerpoint Quickbooks

Network Technology Billing/Collecting

Other Software Skills _____

Road/Maintenance

Do you have any past experience driving a truck? Yes No

(a) If so, please describe: _____

Have you ever had any past experience in operating heavy equipment, power equipment and/or mowers? Yes No

(a) If so, please describe: _____

Do you have experience performing maintenance on equipment? Yes No

Do you have any carpentry or building maintenance experience? Yes No

RECORD OF CONVICTION :

During the last ten years, have you ever been convicted of a crime other than minor traffic offense?

Yes No

If yes, explain: _____

(A conviction will not necessarily automatically disqualify you for employment. Rather, such factors as age and date of conviction, seriousness and nature of the crime, and rehabilitation will be considered).

EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? ___ Yes ___ No

If any employment was under a different name, indicate name _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Duties _____ FT ___ PT ___ No. of Hrs. ___

Reason for Leaving _____

Employer _____ Address _____

Telephone _____ Position _____

Dates of Employment: From _____ To _____
Mo/Yr Mo/Yr

Salary _____ Supervisor _____ Department _____

Duties _____ FT ___ PT ___ No. of Hrs. ___

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Salary _____ Supervisor _____ Department _____

Duties _____ FT ___ PT ___ No. of Hrs. ___

Reason for Leaving _____

If you wish to describe additional work experience, attach the above information for each position on a separate piece of paper.

Explain any gaps in work history: _____

Have you ever been discharged or asked to resign from a job? ___ Yes ___ No

If yes, explain: _____

REFERENCES:

Professional

Name _____

Address _____

Phone (____) _____

Email _____

Name _____

Address _____

Email _____

Phone (____) _____

Personal

Name _____

Address _____

Phone (____) _____

Email _____

Name _____

Address _____

Email _____

Phone (____) _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize Springfield Township to verify their accuracy and to obtain reference information on my work performance. I hereby release Springfield Township from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause. It is my understanding that if I am offered employment, I must be able to perform the essential functions of the job and satisfactorily meet the Township's requirements, including:

- 1) Successful completion of an employment physical exam for all applicants to Township Road Crew positions, which will include the completion of a medical history questionnaire and possibly testing for drugs and/or alcohol.
- 2) Satisfactory references secured by the Township from employers and/or references.
- 3) The submission of documents of proof of citizenship or proof of authorization to work in the United States.
- 4) I understand and agree that any falsification, omissions, or misleading statements on this Application will be grounds for termination of employment if and when discovered.

I authorize the Township to contact references and the former employers as indicated, and I authorize my previous employers and my references to verify the information given on this Application.

Signature

Date