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| THE TOWNSHIP OF KNOWLTON  Employment Application |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Last Name | | |  | | | | | | | | | First |  | | | | | | | | M.I. | | Date | |  | |
| Street Address | | | |  | | | | | | | | | | | | | | | | | Apartment/Unit # | | | |  | |
| City |  | | | | | | | | | | | State |  | | | | | | | | ZIP |  | | | | |
| Phone |  | | | | | | | | | | | E-mail Address | | |  | | | | | | | | | | | |
| Date Available | | | |  | | | | | | Social Security No. | | |  | | | | | | | Desired Salary | | |  | | | |
| Position Applied for | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Are you a citizen of the United States? | | | | | | | | | YES | | NO | | If no, are you authorized to work in the U.S.? | | | | | | | | | | | YES | | NO |
| Have you ever applied to Knowlton Township before? | | | | | | | | | YES | | NO | | If so, when? | | | |  | | | | | | | | | |
| Education | | | | | | | | | | | | | | | | | | | | | | | | | | |
| High School | | |  | | | | | | | | Address | |  | | | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | | YES | | NO | | | Degree | | |  | | | | | | | |
| College | |  | | | | | | | | | Address | |  | | | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | | YES | | NO | | | Degree | | |  | | | | | | | |
| Other | |  | | | | | | | | | Address | |  | | | | | | | | | | | | | |
| From | |  | | | To | |  | Did you graduate? | | | YES | | NO | | | Degree | | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | |
| References | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Please list three professional references. They should not be relatives or former supervisors. | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | | Relationship | | | | |  | | | | | | | |
| Company | | |  | | | | | | | | | | | Phone | | | |  | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | | Relationship | | | | |  | | | | | | | |
| Company | | |  | | | | | | | | | | | Phone | | | |  | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | |
| Full Name | | |  | | | | | | | | | | | Relationship | | | | |  | | | | | | | |
| Company | | |  | | | | | | | | | | | Phone | | | |  | | | | | | | | |
| Address | | |  | | | | | | | | | | | | | | | | | | | | | | | |

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| Previous Employment | | | | | | | | | | | | | | | | |
| This section must be completed even if you attach a resume. List your last 3 employers, major assignment within the same employer. Begin with the most recent. explain any gaps in employment in the space on this form marked comments located at the bottom of the page. | | | | | | | | | | | | | | | | |
| Company | | |  | | | | | | | Phone |  | | | | | |
| Address | |  | | | | | | | | Supervisor | |  | | | | |
| Job Title | |  | | | | | | Starting Salary | | $ | | | Ending Salary | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | |
| From |  | | | | To |  | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | YES | NO |  | | | | | |
| Company | | |  | | | | | | | Phone |  | | | | | |
| Address | |  | | | | | | | | Supervisor | |  | | | | |
| Job Title | |  | | | | | | Starting Salary | | $ | | | Ending Salary | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | |
| From |  | | | | To |  | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | YES | NO |  | | | | | |
| Company | |  | | | | | | | | Phone |  | | | | | |
| Address | |  | | | | | | | | Supervisor | |  | | | | |
| Job Title | |  | | | | | | Starting Salary | | $ | | | Ending Salary | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | |
| From |  | | | | To |  | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | YES | NO |  | | | | | |
|  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | |
| Disclaimer and Signature | | | | | | | | | | | | | | | | |
| I certify that my answers are true and complete to the best of my knowledge. I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true, and accurate. If hired, I understand that I may be separated from employment if the Township of Knowlton later discovers that information on this form was incomplete, untrue, or inaccurate. I give the Township of Knowlton the right to investigate the information I have provided, talk with former employers (except where I have indicated they may not be contacted). I give the Township of Knowlton the right to secure additional job-related information about me. I release the Township of Knowlton and its representatives from all liability for seeking such information. I understand that the Township of Knowlton is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the Township of Knowlton will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the Township of Knowlton may terminate me at any time in accordance with its established policies and procedures. No representatives of the Township of Knowlton may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that some positions may involve complete background and criminal checks.  ***For your application to be considered, you must sign and date below.*** | | | | | | | | | | | | | | | | |
| **Signature** | | | |  | | | | | | | | | | **Date** |  | |