

# MONTGOMERY TOWNSHIP 1001 Stump Road Montgomeryville, PA 18936-9605

www.montgomerytwp.org 215·393·6900 215·565·2665 (Fax)

# Application for Employment

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a disability, or any other legally protected status.

# PERSONAL INFORMATION

Name:	
Last, First, Middle	
Present Address:	
Cell Phone:	Home Phone:
Email Address:	
How did you learn about the position for which yo	ou are applying? (ad, website, e-news):
Referred by:	
EMPLOYMENT DESIRED	
Position:	Date you can start:
Are you employed now?	If so, may we inquire of your present employer?
Have you applied to the Township before?	If yes, when?

#### **EDUCATION**

	Name & Location of School	No. of Yrs. Attended	Did You Graduate?	Major Course of Study
High School				
College				
Trade, Business, or Correspondence School				

Please describe additional skills, training, or ability you would like us to consider in evaluating your qualifications. This may include computer software package experience, licenses or certifications, customer service experience, heavy equipment experience, technical training, etc.:

# Can you work overtime?

# FORMER EMPLOYERS List last four employers, starting with current employer. Information must be completed below.

. Place of Employment	
Address	
	Supervisor
Job Title	Rate of Pay
	Dates of Employment
	Reason for leaving
. Place of Employment	
	Phone
	Supervisor
Job Title	Rate of Pay
	Dates of Employment
	Reason for leaving
Address	Supervisor
	Rate of Pay
	Dates of Employment
	Reason for leaving
. Place of Employment	
	Phone
	Supervisor
Job Title	Rate of Pay
	Dates of Employment

**PROFESSIONAL REFERENCES** Give the names of three persons <u>not related to you</u>, two of whom you have <u>worked with professionally or educationally</u>, that you have known at least one year.

1.	Name Email Phone	Occupation Relation Years Acquainted
2.	Name Email Phone	Occupation Relation Years Acquainted
3.	Name Email Phone	Occupation Relation Years Acquainted

Are you able, with or without accommodation, to perform all of the essential functions of the job for which you are applying?

### **U. S. MILITARY SERVICE**

Do you claim Veter	ans' Preference?			
	If yes, attach fo	orm DD214 with completed ap	pplication.	
Dates of Service:	From	То	Branch	
Rank and Principal Du	uties			
Type of Discharge				
ADDITIONAL				
Are you a United State	es citizen?			
If not, are y	ou an alien lawfully	authorized to work in the Unit	ted States?	
Conviction will not nec	victed of a felony or cessarily disqualify you fr case explain			
Commercial Drive	r's License (CDL) de	esignation:		

I understand that any false answer, statement, or representation made by me in this application shall constitute sufficient cause for discharge. I also understand that nothing contained in this employment application or granting of an interview is intended to create an employment contract between the Township and myself for either employment or for the granting of benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Township unless made in writing. If an employment relationship is established, I understand and agree that it is not for a definite period of time and that I have the right to terminate my employment at any time and that the Township retains a similar right.

I understand that, if accepted for employment, it is necessary to abide by the rules and policies of the Township.

Date:

Signature:

Please answer the following question in 75 words or less.

"What value will you bring to Montgomery Township?"