

NEW HANOVER TOWNSHIP
APPLICATION FOR EMPLOYMENT

EQUAL OPPORTUNITY EMPLOYER:

All applicants will be considered for employment without regard to race, religion, color, sex, national origin, age, marital or veteran status, handicap or any other status protected by law. We are an Equal Opportunity Employer.

GENERAL INSTRUCTIONS:

This application consists of several sections: a questionnaire; a verification; a general waiver; and a description of the position and its essential job functions. Each section must be completed in order for the Township to accept the application as complete. Please print (do not type) an answer to every question. If an answer does not apply to you, please print "N/A" in the space provided. If the space available is insufficient, use the reverse side and precede with the number of the referenced question. Do not misstate or omit material facts. The statements made herein are subject to verification to determine your qualifications for employment. Applications will be considered and retained for a period of ninety (90) days from the date indicated below.

QUESTIONNAIRE

Date ____/____/____

Position(s) applied for _____ Full Time ____ Part Time ____

1. _____
(Last Name) (First Name) (Middle Name) (Suffix)

2. ____-____-____
(Soc. Sec. #)

3. _____
(Alias(es), Nickname(s), Other Changes in Name)

4. _____
(Present Residence, Street/City/State/ Zip)

5. _____ 6. _____
(Telephone No.) (Email)

7. Are you of legal age to work? ____ Yes (Y) ____ No (N)

8. Are you legally eligible for employment in the United States? ____ Yes (Y) ____ No (N)
(If hired, verification will be required by law).

9. **Vehicle Operator's License**

Please provide the following information concerning any vehicle operator's license that you held or hold:

Type of License	Number	Issuing Authority	Expiration

10. **Education**

Please provide the following information concerning any education:

Name & Address of School	Course of Study	Years Completed	Graduation Date
HIGH SCHOOL			
COLLEGE	MAJOR		
	DEGREE		
OTHER			

11. **Special Qualifications**

Please indicate type of special licenses, where the license was first issued, and date of expiration:

Please indicate any special skills not covered in application:

Please indicate any foreign languages and level of proficiency:

Employer:	Phone: ()	From:
Address:	City, State, Zip	Position:
Duties:		Supervisor's Name:
		Starting Salary/Wage:
Reason for leaving:		Final Salary/Wage:

Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)? If yes, please state the reason(s) for such:

Have you ever resigned after being informed that your employer intended to discharge you for any reason? If yes, please state the reason(s) for such and provide the name and address of the employer and date(s):

15. Past and Present Membership in Organizations

Please provide the following:

Organization:	Phone: ()	From:	To:
Address:	City, State, Zip	Office Held:	

Organization:	Phone: ()	From:	To:
Address:	City, State, Zip	Office Held:	

Organization:	Phone: ()	From:	To:
Address:	City, State, Zip	Office Held:	

Organization:	Phone: ()	From:	To:
Address:	City, State, Zip	Office Held:	

16. **Military Service**

Have you ever served in the U.S. Armed Forces? _____ Yes (Y) _____ No (N)

If yes, please attach a copy of discharge or separation papers.

Do you claim veterans' preference? _____ Yes (Y) _____ No (N)

While in military service, were you ever convicted for a crime graded a misdemeanor, felony, or greater offense? If yes, please give the date, place, law enforcing authority, or type of court or court martial, charge and action taken for each incident, using a separate, attached sheet to record this information.

_____ Yes (Y) _____ No (N)

Are you presently a member of a U.S. Reserve or State Guard organization?

If yes, please provide:

Grade and Service No. _____

Service and Component _____

Organization and State or Unit and address _____

Status _____

Reserve obligation _____

18. **Selective Service**

Last classification _____

Selective Service No. _____ Date _____

Local Board _____

Address _____

19. **Conviction of Crime**

Have you ever been convicted of a misdemeanor, felony, or greater criminal violation? If yes, state violation, court of jurisdiction, and date of conviction.

20. **Character References**

NAME	ADDRESS	YEARS KNOWN	TELEPHONE

VERIFICATION

The above information is true and complete to the best of my knowledge. Should the Township employ me, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. Further, I understand that any false statement contained therein is subject to the penalties prescribed by 18 Pa. C.S. § 4904, relating to unsworn falsification to authorities.

The Township, in compliance with the provisions of the Fair Credit Reporting Act of Sept. 1997, may contact directly or employ the services of investigative agencies to obtain all necessary information from the references I have listed, or any other sources, concerning my prior employment, personal history, or credit standing. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished to the Township.

I understand this application does not constitute an employment contract of any kind. Should the Township employ me, I may resign such employment at any time at my discretion with or without prior notice and the Township may terminate my employment at any time at their discretion, with or without cause and with or without prior notice.

Name (Print)

Date

Name (Signature)

WAIVER AND RELEASE FOR BACKGROUND INFORMATION

I, _____, am presently applying for employment with New Hanover Township (the "Township"), which I acknowledge and understand must thoroughly investigate my employment background, criminal history, personal background, education, and references in order to evaluate my qualifications for a position with the Township. I understand that it is in the public's interest that all relevant information in this regard, including my personal and employment history with my current and former employers, be disclosed to the Township.

By this release, I hereby authorize any representative of all my former employers, which have been fully disclosed and identified in my employment application, to divulge any information in its files pertaining to my employment records and history, and I further authorize the release of such information upon request to any representative of the Township. I also authorize all former employers identified in my employment application to permit a review and full disclosure of all records, or any part thereof, concerning myself and my employment with those former employers, by and to any duly authorized agent of the Township, whether said records are of public, private, or confidential nature.

The intent of this authorization is to permit all former employers identified in my employment application to provide, and for the Township to obtain, full and free access to the background history of my personal life and my employment history and performance, for the specific purpose of permitting the Township of conducting a thorough background investigation regarding me, which will provide pertinent data for consideration by the Township with access to personnel information, however personal or confidential it may appear to be.

I authorize all former employers, which have been fully disclosed and identified in my employment application, to release any and all public and private information that it may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including my arrest record(s) and records compiled during or as the result of a criminal investigation(s) of me, efficiency ratings, complaints, or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in any case, either criminal or civil, in which I presently have, or have had, an interest, and attendance records.

I hereby release all former employers identified in my employment application, and, if applicable, their elected and appointed officials, employees and agents and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal law. I hereby release all former employers identified in my employment application, and, if applicable, its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct all former employers identified in my employment application to release such information upon request of the duly accredited representative of the Township, regardless of any agreement, written or oral, that I may have made with the former employer to the contrary.

Additionally, I also give the Township the right to thoroughly investigate my background, previous employment, education, and references to ascertain my suitability for service as a New Hanover Township employee. I release and hold harmless New Hanover Township, its elected and appointed officials, agents, and employees from and against any and all liability which might result from conducting such an investigation, including any damages of whatever kind that may at any time result to me, my heirs, family, or associates because of such investigation.

I recognize and understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and disclosure of records, and I waive those rights with the understanding that information furnished by any former employer will be used by New Hanover Township in conjunction with employment procedures.

I understand that if a former employer refused to cooperate with this investigations by failing to provide full disclosure of any and all relevant information about me, then New Hanover Township may disqualify me from further consideration for employment as an employee of New Hanover Township.

A photocopy or facsimile of this release form will be valid as an original thereof, even though the said photocopy or facsimile does not contain an original writing of my signature. This waiver is valid for a period of one (1) year from the date of my signature. Should there be any questions as to the validity of this release, you may contact me at the address listed on my employment application.

I agree to indemnify and hold harmless the person to whom this request is presented, as well as his agents and employees, from and against all claims, damages, loses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

Name (Print)

Date

Name (Signature)

ESSENTIAL DUTIES OF POSITION

I have reviewed the job description for this position and believe that I can fully perform all duties with or without reasonable accommodations.

Name (Print)

Date

Name (Signature)