



**Employment Application**

Fairview Township  
599 Lewisberry Road  
New Cumberland, PA 17070-2399  
717-901-5200

[www.twp.fairview.pa.us](http://www.twp.fairview.pa.us)

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

**Please Print**

Position(s) Applying For: \_\_\_\_\_ Date of Application(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

If you are under 18 years of age, can you provide required proof of your eligibility to work? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever filed an application with us before? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, give date \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, give date \_\_\_\_\_

May we contact your present employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? \_\_\_\_\_ Yes \_\_\_\_\_ No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work? \_\_\_\_\_

Are you available to work: Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Shift Work \_\_\_\_\_ Temporary \_\_\_\_\_

Are you currently on "lay-off" status and subject to recall? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you travel if a job requires it? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you been convicted of a felony within the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No  
Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain \_\_\_\_\_

I certify that answers given herein are true and complete to the best of my knowledge.

All applicants agree to (prior to hiring) drug and alcohol testing and background check.

**Signature:** \_\_\_\_\_

**Applicant's Statement**

This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, employment with this Township is an "at will" position, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that "at will" employment may not be changed by any written document or conduct unless such change is specifically acknowledged in writing by an authorized official of this Township. In the event of employment, I understand that false or misleading information given in my application or interviews may result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR PERSONNEL DEPARTMENT USE ONLY**

Arrange Interview Yes\_\_\_ No\_\_\_ Date of Interview\_\_\_\_\_

Remarks \_\_\_\_\_  
\_\_\_\_\_

Employed Yes\_\_\_ No\_\_\_ Date of Employment\_\_\_\_\_

Job Title \_\_\_\_\_ Hourly Rate/Salary\_\_\_\_\_ Department\_\_\_\_\_

**Notes:**

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

**Employment Experience**

Start with your most recent employment. Include any job-related military service assignments and volunteer work. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

1. Employer Address	Dates Employed		Work Performed
	From	To	
	Telephone Number(s)		
	Job Title		
	Supervisor		
	Reason for Leaving		
2. Employer Address	Dates Employed		Work Performed
	From	To	
	Telephone Number(s)		
	Job Title		
	Supervisor		
	Reason for Leaving		
3. Employer Address	Dates Employed		Work Performed
	From	To	
	Telephone Number(s)		
	Job Title		
	Supervisor		
	Reason for Leaving		
4. Employer Address	Dates Employed		Work Performed
	From	To	
	Telephone Number(s)		
	Job Title		
	Supervisor		
	Reason for Leaving		

**Special Skills and Qualifications**

Summarize special job-related skills and qualifications acquired from employment or other experience.


Education	Year	Diploma/Degree	
	Completed	Yes ___	No ___
High School		Yes ___	No ___
Undergraduate College/University		Yes ___	No ___
State any additional information you feel may be helpful to us in considering your application.			
Indicate any foreign languages you can speak, read and/or write.			
List professional, trade, business or civic activities and offices held.			
<i>You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:</i>			
<b>References</b>			
Give name, address and telephone number of three references who are not related to you and are not previous employers.			
1.			
2.			
3.			
4.			
Have you ever had any job-related training in the United States military?		Yes ___	No ___
If yes, please describe:			