

TOWNSHIP OF SHALER

300 Wetzel Road
Glenshaw, PA 15116-2288
412-486-9700

APPLICATION FOR EMPLOYMENT

Shaler Township is an Equal Opportunity Employer. All qualified applicants will be considered without regard to race, color religion, national origin, ancestry, sex, non-job related disabilities or age. All information requested on this application is solicited for the purpose of determining abilities and skills required for proper job placement and to facilitate verification of the information requested.

Instructions: This application must be completed in its entirety. Please print in ink or type. If, because of a disability, you need assistance in completing this application form please notify the Manager's Office at 412-486-9700.

Date: _____

First Name: _____ Last Name: _____

Street: _____ City/State/Zip: _____

H.Phone: _____ Cell: _____ E-mail: _____

Are you over 18 years of age? Yes No If no, do you have a work permit? Yes No

Position (s) applied for (be specific) _____

Driver's License # _____ Do you have a commercial driver's license? Yes No

Would you work Full-Time? Yes No Part-Time? Yes No

List any friends or relatives presently working for Shaler Township? _____

If hired, how soon will you be available for work? (Date) _____

EDUCATION:

High School Name: _____ Address: _____

Course: _____ Graduated: Yes No Other: _____

College/Other: _____ Address: _____

Course: _____ Graduated: Yes No Degree: _____

College/Other: _____ Address: _____

Course: _____ Graduated: Yes No Degree: _____

MILITARY: Branch of Service: _____ Length of Service: _____ Rank at Separation: _____

Reserve Requirements: _____ Specialized Training: _____

Have you been Honorable discharged? Yes No If yes, please attach Form DD-214

EXPERIENCE: List positions beginning with most recent.

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

Company Name: _____ **Address:** _____

Employed Dates: _____ Position Held: _____

Salary: _____ Reason for Leaving: _____

Name and Title of Supervisor: _____ E-mail or Phone: _____

May we contact the employers listed above? Yes No

If no, which one(s) do you not wish us to contact:

REFERENCES: (exclude past employers and relatives)

Name and Occupation: _____

Address: _____ E-mail or Phone: _____

Name and Occupation: _____

Address: _____ E-mail or Phone: _____

Name and Occupation: _____

Address: _____ E-mail or Phone: _____

OTHER QUALIFICATIONS:

Describe the types of equipment you are capable of operating, (machines, vehicles, computers, etc.)

List any trade, professional or skill certifications you hold.

Summarize any special skills, experience or background which you feel qualifies you for the position(s) being applied for:

BACKGROUND:

Have you ever been convicted or pled guilty to any crime involving violence to another person? Yes No

Have you ever been convicted or pled guilty to any crime involving dishonesty, theft, fraud or embezzlement?
Yes No

Have you ever been convicted or pled guilty to any sexual crimes including rape, assault or involving minors?
Yes No

Have you ever been convicted or pled guilty to any crime involving distribution or intent to distribute illegal drugs or other controlled substances?
Yes No

Have you ever been counseled or disciplined for cash handling violations? Yes No

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureau of your choice.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby authorize all current and former employers, educational institution and references to release information relevant to my application for employment and I release the Township, all current and former employers, education institutions and references from any and all liability related to the release of such information.

Please attach resume. If sending application by e-mail, please save to your computer and attach to e-mail:
Application may be e-mailed to: shaler@shaler.org

Signature of Applicant