

Upper Dublin Township
 801 Loch Alsh Avenue
 Fort Washington, PA 19034
 www.upperdublin.net

It is the policy of the Township to provide equal opportunity with regard to all terms and conditions of employment. The Township complies with federal laws, state laws and local Upper Dublin Township ordinance prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age, sexual orientation, gender identity, gender expression, or any other legally-protected characteristic.

Instructions: Download/save application to your computer. Complete the application and re-save. Email the completed application to employment@upperdublin.net or mail it to Attn: Human Resources at the above address.
***Important:** verify the that attachment on your email to employment@upperdublin.net is the completed version of your application.

Application for Employment

Name: _____ Phone: _____
Last First Middle

Address: _____
Street City State Zip

Email: _____ Position applied for: _____

Expected pay: \$_____ Would you accept full-time work? Yes No

Would you accept part-time work? Yes No On what date would you be available for work? _____

Have you ever been employed by Upper Dublin Township? Yes No

If yes, please give dates: _____

Are you legally eligible for employment in the United States? No Yes (if yes, proof is required if hired)

If you are under 18 years old, can you provide a work permit if required? Yes No

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation)? This question is not designed to elicit information about an applicant’s disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary/ These issues may be addressed at a later stage to the extent permitted by law.

Yes No Need more information about the job’s “essential functions” to respond

Explain any gaps in your employment, other than those due to personal illness, injury or disability:

Have you ever been fired or asked to resign from a job? No Yes

If yes, please explain: _____

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, in the past ten (10) years, which has not been annulled or expunged or sealed by a court? No Yes

If yes, please describe: _____



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Special Training or Skills

Languages, machine operation, etc. that would be of benefit in the job for which you are applying:

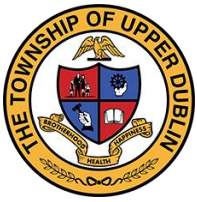
Employment Experience

Place an X by the employer(s) you DO NOT want to be contacted. List your most recent employer first.

Employer: _____
 Contact Name: _____
 Address: _____ Phone: _____
 Job Title: _____ Supervisor: _____
 Dates Employed: from ____/____/____ to ____/____/____ Hourly Rate/Salary: ____/____/____
mm yyyy mm yyyy starting final/current
 Work Performed: _____
 Reason for Leaving: _____

Employer: _____
 Contact Name: _____
 Address: _____ Phone: _____
 Job Title: _____ Supervisor: _____
 Dates Employed: from ____/____/____ to ____/____/____ Hourly Rate/Salary: ____/____/____
mm yyyy mm yyyy starting final/current
 Work Performed: _____
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Educational Background

High School: _____ Location: _____
 Course of Study: _____ Did you graduate? Yes No Degree or diploma: _____
College: _____ Location: _____
 Course of Study: _____ Did you graduate? Yes No Degree or diploma: _____
Graduate School: _____ Location: _____
 Course of Study: _____ Did you graduate? Yes No Degree or diploma: _____
Vocational Training/Other: _____ Location: _____
 Course of Study: _____ Did you graduate? Yes No Degree or diploma: _____
Continuing Education: _____

Personal References (Not Former Employers Nor Relatives)

Name & Occupation	Address	Phone Number

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false or misleading information, omissions or misrepresentations are discovered, my application may be rejected, and if I am employed, my employment may be terminated at any time.

In consideration of my employment, I agree to conform to the Township's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Township's option.

I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Township. I understand that no Township representative, other than the Township Manager, and then only when in writing and signed by the Township Manager, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the forgoing.

 Applicant Signature

 Date