



Date of Application: \_\_\_\_\_

## UPPER MERION TOWNSHIP

### APPLICATION OF EMPLOYMENT

**Upper Merion Township is an Equal Opportunity Employer/Affirmative Action Employer.**

Applicants are considered for employment with Upper Merion Township without regard to their race, color, religion, national origin, age, sex, gender, pregnancy, disability, sexual orientation, gender or genetic information. All applicable laws regarding military and veteran status will be followed.

#### EMPLOYMENT DESIRED:

Position applying for: \_\_\_\_\_

Available start date: \_\_\_\_\_ Full-Time:  Part-Time:

How did you learn of this employment opportunity: \_\_\_\_\_

Salary requirements: \_\_\_\_\_

#### PERSONAL INFORMATION:

Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_  
(Last) (First) (Middle)

Present Address: \_\_\_\_\_  
Street City State Zip

Permanent Address: \_\_\_\_\_  
Street City State Zip

Home Telephone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

#### EDUCATION:

Name & Location	Yrs. Attended	Did you Graduate?	Degree/Major:
High School: _____	_____	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	_____
College: _____	_____	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	_____
Graduate School: _____	_____	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	_____
Bus./Trade School: _____	_____	Yes: <input type="checkbox"/> No: <input type="checkbox"/>	_____
Certifications/specialized training: _____			
_____			
_____			

## EMPLOYMENT HISTORY:

Please list your last three (3) jobs starting with your most current, and all others in descending order. Please ensure that you list all employment, including any military service. If additional space is required, please list any other positions held on an 8 1/2 x 11 sheet, and attach it to your application.

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your employer: Yes:  No:  (If not, please explain): \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your employer: Yes:  No:  (If not, please explain): \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Job Title: \_\_\_\_\_ Starting Salary: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_

May we contact your employer: Yes:  No:  (If not, please explain): \_\_\_\_\_

Job Responsibilities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Military Service:

Branch of Service: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Type of Discharge: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_  
Rank/Grade: \_\_\_\_\_ Principal Duties: \_\_\_\_\_  
\_\_\_\_\_

### References:

Please list at least three (3) professional references; two (2) of which must be designated as work related references, preferably a current or former supervisor(s).

Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Company: \_\_\_\_\_

Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_

Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_

### BACKGROUND QUESTIONNAIRE:

1. Have you ever worked for Upper Merion Township before? Yes:  No:  If so, when: \_\_\_\_\_
2. Are you able to perform the essential functions for the job in which you are applying: Yes:  No:
3. If no to #2, are you able to perform the essential functions of the job in which you are applying for with or without a reasonable accommodation Yes:  No:
4. Are you lawfully permitted to work in the United States: Yes:  No:
5. Are you 18 years of age or over: Yes:  No:
6. Have you ever been convicted of a felony or misdemeanor: Yes:  No:  If yes, please explain:  
(Note: A felony and/or misdemeanor conviction will only be considered to the extent the conviction relates to the applicant's suitability for the position applied for.)

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

## CONSENT:

I hereby authorize investigation of all statements contained in this employment application and authorize Upper Merion Township to perform a background check. With the submission of this application, I certify that all statements herein are true and correct to the best of my knowledge and belief. Any misrepresentation or omissions on this application may be cause for rejection of my application, and/or that if hired, I may be released from employment with Upper Merion Township.

I understand that all employees of Upper Merion Township are employed at-will, which means that either the Township or the employee may terminate the employment relationship at any time, with or without cause. Employees covered by a collective bargaining agreement will be governed by the terms and conditions of the contract. No employee or representative of the Township has the authority to enter into any agreement specifying the duration of employment or abrogating an employee's at-will employment status. I understand that this application is not intended to confer any contractual right or obligation to any party and that the Township reserves the right to change any practice, policy, or procedure with or without notice, at its sole discretion.

I hereby understand that any offer of employment is contingent on the results of a successful background check and pre-employment drug screen. Confirmed positive drug/alcohol test results will automatically disqualify an applicant from employment with Upper Merion Township. Applicants applying for employment under 18 years of age must have parental consent.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please note: this is a fillable form, but the features may not work in all browsers. If the submit button does not work, please download the completed application as a PDF. For immediate consideration, applicants should submit this completed application, along with a cover letter and resume, to [hr@umtownship.org](mailto:hr@umtownship.org).*

