

SPRING GARDEN TOWNSHIP

ADMINISTRATION • 340 TRI HILL ROAD, SUITE A
YORK, PA 17403-5709
PHONE NUMBER: 717.848.2858

Application for Employment

Spring Garden Township is an Equal Opportunity Employer – Spring Garden Township does not discriminate on account of race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION (Print or Type – incomplet	te information could disqualify you from further consideration)
Candidate's Name:	Date:
Address:	
Telephone Number (home):	Cell Phone Number:
Are you 18 years of age or older?	
Are you either a U.S. citizen or an alien authorized	I to work in the U.S.?
	t or asked to resign by an employer?
May we contact your present employer? \Box Yes	□ No
Have you been convicted or entered a plea of guil	ty or no contest to any felony? Yes No
sealed by law? $\ \square$ Yes $\ \square$ No (Conviction will	ty or no contest to any misdemeanor that has not been not necessarily disqualify an applicant from employment)
Do you meet the Physical Requirements necessary attached Job Description, with or without reasona	y to perform the Essential Functions as set forth in the able accommodation?
POSITION DESIRED	
Position: S	Start date available:
How did you learn about this job opening?	
Wage rate desired: \$ ☐ Hourly	☐ Annually
Do you prefer: ☐ Full-time ☐ Part-time	
Are you able to work:	ends
Have you previously worked for Spring Garden To If yes, when? (provide dates):	wnship? ☐ Yes ☐ No Job Title:

Graduated? ☐ Yes ☐ No	Course of Study:
Graduated? ☐ Yes ☐ No	Course of Study:
Graduated? ☐ Yes ☐ No	Course of Study:
Graduated? ☐ Yes ☐ No	Course of Study:
t recent. You may at	tach another sheet of paper if
l	
Address:	
	Reason for Leaving:
	May we contact? ☐ Yes ☐ No
onsibilities:	
	Graduated? Yes No Graduated? Yes No Graduated? Yes No Graduated? Yes No

Employer:		Address:		
From: To:	Position Held:		Reason for Leaving:	
Supervisor's Name & Ti	itle:		May we contact? ☐ Yes ☐ No	
Summarize the nature	of work performed and job res	ponsibilities:		
Reason for leaving:				
Employer:		Address:		
From: To:	Position Held:		Reason for Leaving:	
Supervisor's Name & Ti	itle:		May we contact? ☐ Yes ☐ No	
Summarize the nature	of work performed and job res	ponsibilities:		
Reason for leaving:				
REFERENCES				
Identify three persons w	ho know your work, beginning	with the most rec	ent. Do not use relatives.	
Name:	Phone Number:	E	Email:	
Position or Title:		Years		
Name:	Phone Number:		Email:	
			Known:	
Name:	Phone Number:	E	Email:	
Address:		City, State, Zip:		

Position or Title:	Years Known:
REFERRAL SOURCE	
How did you hear about us? ☐ Walk-in ☐ Advertisem	
Do you have any relatives or friends who work for Sprin If yes, who?	·
How did you learn about this opening?	
AUTHORIZATION AND ACKNOWLEDGEMENTS	
I affirm that the information I have provided in this applinformation and belief, and I have not knowingly withher withholding or misstating any information requested in application, and that providing false or misleading information.	eld any information requested. I understand that this application is grounds for rejection of my
I authorize the company to verify my references, record information I have provided. Unless otherwise noted, I a information related to my work record and my profession notice of such disclosure. In addition, I release the compentities, from any and all claims, demands or liabilities a disclosure.	authorize the references I have listed to disclose any onal experiences with them, without giving me prior pany, my former employers and all other persons and
I understand that approval of my application for employ any specific period of time that the Township may, in its (consistent with law). It is noted that employees hired for have a right to challenge the termination of their employees established grievance procedure set forth in the specific	of discretion, terminate employment for any reason for positions included in recognized bargaining units byment (or other disciplinary action) through the
If offered a position, I understand that I will be required as a condition of employment. Unsatisfactory results from affect the results of the background check will result in soffer or terminating my employment. I understand, also regulations of my employer. I also understand that I will alcohol screening as a condition of employment.	om, refusal to cooperate with, or any attempt to Spring Garden Township rescinding the employment o, that I am required to abide by all the rules and
I attest with my signature below that I have provided Spinformation on this application. No requested informat given is untrue, or if I have concealed material informat the denial of employment or immediate dismissal.	ion has been concealed. If any information I have
Candidate's Signature	Date