LOWER WINDSOR TOWNSHIP

2425 Craley Road Wrightsville, PA 17368

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

irst Name		MI	Last Name	9	
Address					
4uu1 E33					
Home Phone		Cell	Phone		
GENERAL INFORMA ⁻	TION				
Who referred you?					
Do you have a relati	ve who w	orks here?Yes _	No		
If yes, who?					
DESIRED EMPLOYMI	ENT				
Position applying for					
Date you can start:			Sala	ary Desired:	
	ow?	YesNo			
Are you employed n If so, may we inquire			YesN	lo	
Are you employed n			YesN	lo	
Are you employed n			YesN	lo	
Are you employed n If so, may we inquire			YesN	lo	
Are you employed n				lo	Subject Studied (i e
Are you employed n If so, may we inquire	e of your		Yes N Years Attended	Did you graduate?	Subject Studied (i.e. honors, academic,
Are you employed n If so, may we inquire EDUCATION	e of your	present employer?	Years		II -
Are you employed n If so, may we inquire EDUCATION School Level	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level Elementary School	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level Elementary School High School	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level Elementary School	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level Elementary School High School College	e of your	present employer?	Years		honors, academic,
Are you employed n If so, may we inquire EDUCATION School Level Elementary School High School	e of your	present employer?	Years		honors, academic,

FORMER EMPLOYERS			
List below the last three (3) employe	ers starting with	the most recent one first.	
Name of Present or Last Employer:			
Address:			
Start Date:	Leave Date:	Job Title:	
Weekly Starting Salary:		Weekly Final Salary:	
May we contact your Supervisor? _	Yes	No	
Name of Supervisor:		Title:	
Phone:			
Description of Work:			
Reason for leaving:			
Name of Previous Employer:			
Address:			
Start Date:	Leave Date:	Job Title:	
Weekly Starting Salary:		Weekly Final Salary:	
May we contact your Supervisor?	Yes	No	
Name of Supervisor:		Title:	
Phone:			
Description of Work:			·····
Reason for leaving:			
Name of Previous Employer:			
Address:			
Start Date:	Leave Date:	Job Title:	
Weekly Starting Salary:		Weekly Final Salary:	
May we contact your Supervisor?	Yes	No	
Name of Supervisor:		Title:	
Phone:			
Description of Work:			
Reason for leaving.			

NAME		0001:5:5:5:	VEADO
	ADDRESS	OCCUPATION	YEARS KNOWN
			KNOWN
1			
2			
3			
MILITARY SERVICE			
Branch	From	То	
Rank at Discharge	Type of Dis	charge	
If other than honorable, please explain:			
Do you object to an investigation of your back			
שט זיטע טאוכטנ נט מון ווועכאנובטווטוו טו עטעו Dack	round including but not ilmited to r	your physical and ment	al condition
and history, financial condition and history, yo	_		
	_		
and history, financial condition and history, yo	_		
and history, financial condition and history, yo	_		
and history, financial condition and history, yo	ur honesty and moral standards, an		
and history, financial condition and history, yo background if any?YesNo	ur honesty and moral standards, an AUTHORIZATION	d your criminal and driv	ving
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this applica	ur honesty and moral standards, an AUTHORIZATION tion are true and complete to the b	d your criminal and driv	ving
and history, financial condition and history, yo background if any?YesNo	ur honesty and moral standards, an AUTHORIZATION tion are true and complete to the b	d your criminal and driv	ving
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this applicathat if employed, falsified statements on this at authorize investigation of all statements contained.	AUTHORIZATION tion are true and complete to the be pplication shall be grounds for dismained herein and the references and	d your criminal and drivest of my knowledge are issal.	ving nd understand ve to give you
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this application that if employed, falsified statements on this all authorize investigation of all statements contany and all information concerning my previous	AUTHORIZATION tion are true and complete to the bipplication shall be grounds for dismained herein and the references and semployment and any pertinent in	d your criminal and driversest of my knowledge and issal. d employers listed above formation they may have	ving nd understand ve to give you ve, personal c
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this applicathat if employed, falsified statements on this at authorize investigation of all statements contained.	AUTHORIZATION tion are true and complete to the bipplication shall be grounds for dismained herein and the references and semployment and any pertinent in	d your criminal and driversest of my knowledge and issal. d employers listed above formation they may have	ving nd understand ve to give you ve, personal c
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this application that if employed, falsified statements on this all authorize investigation of all statements contany and all information concerning my previous otherwise and release the company from all line.	AUTHORIZATION tion are true and complete to the be pplication shall be grounds for dismained herein and the references and s employment and any pertinent in ability for any damage that may results.	est of my knowledge ar issal. d employers listed abov formation they may ha ult from utilization of su	ving nd understand ve to give you ve, personal c uch informatic
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this application that if employed, falsified statements on this all authorize investigation of all statements contany and all information concerning my previous otherwise and release the company from all like I also understand and agree that no represent	AUTHORIZATION tion are true and complete to the bipplication shall be grounds for dismained herein and the references and semployment and any pertinent in ability for any damage that may resulative of the company has any authorized.	est of my knowledge ar issal. d employers listed abov formation they may ha ult from utilization of su rity to enter into any ag	ving ve to give you ve, personal c ach informatic greement for
and history, financial condition and history, yo background if any?YesNo I certify that the facts contained in this application that if employed, falsified statements on this all authorize investigation of all statements contany and all information concerning my previous otherwise and release the company from all line.	AUTHORIZATION tion are true and complete to the be pplication shall be grounds for dismained herein and the references and s employment and any pertinent in ability for any damage that may resulative of the company has any author to make any agreement contrary	est of my knowledge ar issal. d employers listed abov formation they may ha ult from utilization of su rity to enter into any ag	ving ve to give you ve, personal c ach informatic greement for
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Lower Windsor Township Supplemental Employment Application Highway Department

Signati	ure Date
7.	employment qualification test which may include a drug test and/or physical exam?YesNo
6.	Do you object to an investigation of your background including but not limited to your physical and mental condition and history, financial condition and history, your honesty and moral standards, and your criminal and driving background if any?YesNo
5.	CDL Number:
4.	Do you have a valid CDL?YesNo
3.	Drivers License Number:
2.	Number of years as a licensed driver?
1.	Do you have a valid PA driver's license? Yes No