



PENN TOWNSHIP, WESTMORELAND COUNTY - Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Are you 18 of age or older? YES ☐ NO ☐ Desired Salary: \$ _____

Position Applied for: _____

Are you a resident of Penn Township? YES ☐ NO ☐

Have you ever worked for Penn Township? YES ☐ NO ☐ If yes, when? _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work YES ☐ NO ☐
in the U.S.?

Do you possess a valid Pennsylvania Driver's License? YES ☐ NO ☐ License Number: _____

Education

High School: _____ Address: _____

Did you graduate High School? YES ☐ NO ☐

College: _____ Address: _____

Did you graduate College? YES ☐ NO ☐ Degree: _____

Military Service

Branch: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____ E-mail: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____ E-mail: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____ E-mail: _____

Previous Employment

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES
☐

NO
☐

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES
☐

NO
☐

PENN TOWNSHIP, WESTMORELAND COUNTY
EMPLOYMENT APPLICATION

LAST NAME: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a
reference?

YES
☐

NO
☐

Other Qualifications

List any trade, professional or skills certificates you hold. Describe any equipment you can operate (machines, computers, etc.). Give details of any special skills, abilities or experience which qualify you for this position.

Disclaimer and Signature

I certify that the information supplied by me on this application and in my resume, if any, is true and complete and does not contain any falsification, omission or concealment of material fact. I authorize Penn Township to investigate the truth of this information and of any other information I may supply during a pre-employment interview. I further authorize every school, employer, person and agency identified by me on this form or in my resume to release any and all verifying information to Penn Township. I further authorize Penn Township to investigate my criminal history and other aspects of my personal history, including my character and general reputation. If my application is denied in whole or in part because of information contained in a criminal history records report, Penn Township will so advise me.

I hereby release all law enforcement agencies, my former employers, all educational institutions and programs and every other person identified by me on this form or in my resume from liability for any damage or injury to me arising out of the release of information requested by Penn Township.

I hereby acknowledge that I read this section of the employment application and fully understand the meaning and effect of signing this form. I am signing this document with the full understanding that any false information or statement will be subject to the criminal penalties of 18 PA C.S.A. § 4904, relating to unsworn falsification to authorities, and could result in permanent disqualification as a candidate for the position.

Penn Township is an Equal Opportunity Employer.

Signature: _____ Date: _____

PENN TOWNSHIP COMMISSIONERS

TELEPHONE
(724) 744-2171

2001 MUNICIPAL COURT
HARRISON CITY, PA. 15636
www.penntwp.org

FAX
(724) 744-2172

Policy for Motor Vehicle Record Review

I, _____ authorize the Township of Penn, Westmoreland County, Pennsylvania, to request and obtain my motor vehicle records for purposes of verifying my driving record to assure that I am in compliance with its safe driver policies. Any information obtained by the Township of Penn is not authorized to be distributed further without my permission.

Signature _____

Date _____

Last Name:	First Name:	Middle Initial:
Maiden Name or Other Name Used:		
Current Address:		
City:	State:	Zip Code:
Driver License Number:	Date of Birth:	