

TOWNSHIP OF HAVERFORD
Application for Employment
An Equal Opportunity Employer

Haverford Township considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability or any other legally protected status.

This application must be completed in its entirety in order for the Township to accept the application as complete. **PLEASE PRINT (do not type)**, an answer to every question. If a particular question does not apply to you, so state with **N/A**. If the space provided is insufficient use a supplemental page(s) and list the applicable page(s) and question number(s).

Mistakes made should **ONLY** be corrected by drawing a single line through the mistake and placing your initials at the end. **MISTAKES ARE NEVER TO BE CORRECTED WITH WHITEOUT OR ERASED.**

DO NOT MISSTATE OR OMIT MATERIAL FACT(S) SINCE STATEMENTS MADE HEREIN ARE SUBJECT TO VERIFICATION TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT.

MISSTATEMENT(S) OR OMISSION(S) IS CAUSE FOR REJECTION. IT SHOULD BE NOTED THAT FALSIFICATIONS OR INTENTIONAL MISSTATEMENTS, MATERIAL HALF TRUTHS AND OMISSIONS ARE CAUSE FOR REJECTION FOR APPOINTMENT, AND REVOCATION OF APPOINTMENT REGARDLESS OF THEIR TIME OF DISCOVERY.

You are notified that all statements and background information will be thoroughly investigated by the Township of Haverford.

This application will be kept on file for one year from the date it is submitted. It is the applicant's responsibility to ensure that a current application is on file. This will include the applicant notifying the Township of any changes in their address, phone number(s).

Name: _____

Date Submitted: _____

Received by: _____

POSITION: _____

1: _____ 2: _____
Last Name First Middle SSAN

3: _____
Alias(s), Nickname(s), Maiden Name, Other changes in name.

4: _____
Present Address: Street/ City/Apt/State/Zip

4a _____ 4b _____ 4c _____
Home phone number Work phone number Cell/Pager number

5: U.S. Citizen: Yes () No () By Birth () Naturalization (). If Naturalized, complete below:

City, State Court Certification # Petition # Date

MARITAL STATUS

Married () Single () Separated () Divorced () Widowed ()

Last Name (spouse) Maiden Name First Middle

Street Address City/Town State Zip

Home Phone Work Phone Cell/Pager

List All Children and Dependents

Name Age Relationship

Address City/Town State Zip

Name Age Relationship

Name of School	Attended From – To		
Address	City/Town	State	Zip
Phone Number	Highest Grade Completed		

Did you graduate High School? Yes () No ()
 Did you obtain a GED Certificate? Yes () No () N/A ()

Colleges/Universities/Trade Schools Attended

Do you have a college/university/trade school degree/certificate? Yes () No ()
 How many college credits have you earned? _____
 What was your major course of study? _____

Skills and Training

List all skills and training received: _____

Employment

Beginning with your current employment list your work history for the past 15 years including part time, temporary, seasonal internship, volunteer positions and all periods of unemployment. **Account for all time periods.** All employers will be contacted.

Current
 Employer: _____

Address	Phone Number	Supervisor
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Applicant's Position/Title	Salary	Date(s) of Employment
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Reason(s for wanting to leave

Employer _____

Address	Phone Number	Supervisor
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location(s), charge(s) and disposition(s). supplemental page(s).

(Conviction will not necessarily disqualify applicant from employment)

7. Have you ever received or been issued a non-traffic citation? Yes () No (). If yes explain in full detail the location(s), date(s), charge(s) and disposition(s). _____

8. Have you ever possessed a driver's license in another State or Country? Yes () No (). If yes explain in detail the reason(s) for possessing an out of State license, the State, the years, was this license ever suspended or revoked. _____

9. Are you a Veteran of the United States Military? Yes () No (). If yes which branch, years of service, Military occupation, date of discharge and type of discharge. _____

References

List three references, they cannot be related to you or employees of the Township of Haverford

Name	Address	Phone Numbers (home, cell & work)
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Name	Address	Phone Numbers (home, cell & work)
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Name	Address	Phone Numbers (home, cell & work)
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Emergency Contacts

Please provide the names, addresses and telephone numbers (home, work and cell) for two people who should be contacted in the event of an emergency.

Name	Address	Phone Numbers (home, work & cell)
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