## STOWE TOWNSHIP APPLICATION FOR EMPLOYMENT

(Applications will be kept on file for one year)
PERSONAL INFORMATION Complete all applicable information

Name (Full - Last, First, MI)							Social Security Number					
Position(s) applied for:							Are you willing to work: Full Time Part Time Temporary Weekends Evenings Nights					
Street Address:					City			State		Zip	1	
Home Phone	Business Phone							mployed by Stowe Township?				
Are you legally authorized to work in the United States?Yes				_ No					d you start employment?			
Have you ever applied for Yes No	employme When?	ent with Stowe Tox	wnship?	Have yo	u ever been	convicte	d of a crime	other than	a traffic	violation? E	xplain.	
Do you have a High School Diploma or GED?				PA Driver's License Number T				ype (Operators/Other) Valid?(Yes/No)				
EMPLOYMENT HISTO	RY (List be	elow last three emp	oloyers, st	arting with	the most r	recent one	e first)		tanki i wi			
Present or Last Position Name of Company								rom Mo/Yr		To Mo/Yr		
Street Address:				City				State		Zip		
Duties:	700 MILES - 1				Reason f	or Leavin	g:					
Starting Annual Salary	Final A	nnual Salary	Salary Bonus		Commis		nission	sion		May we contact your supervisor?		
Name of Supervisor Title and Do					partment of Supervisor			Phone Number of Supervisor				
Next Previous Position Name of Compa			Company	pany			From M	From Mo/Yr		To Mo/Yr		
Street Address				City					State		4	
Duties:					Reason fo	or Leavin	g:					
Starting Annual Salary Final Annual Salar		ry	Bonus				Commission					
Name of Supervisor	,		Title a	nd Departm	ent of Sup	ervisor		Phone N	lumber o	f Superviso	7	
Next Previous Position Name of Con			Company	mpany			From M	From Mo/Yr		To Mo/Yr		
Street Address			_	City				State		Zip		
Duties:					Reason fo	or Leavin;	g:					
Starting Annual Salary Final Annual Salary			гу	Bonus				Commission				
Name of Supervisor  Title as			and Department of Supervisor				Phone Number of Supervisor					
EDUCATION INFORMA	TION											
High School or GED Address			City		у	State	Degree	3	Subjects	Studied		
College	College Address			City		у	State	Degree		Major	GPA	
College Address		City		у	State	Degree	:	Major	GPA			
Other Address				Cit	у	State	Degree		Major	GPA		

Military Experience? (Yes/No)	Branch of Service	The state of the s	Highest Rank	
Other education, training or skills	And the State of t	Makes it was take	and the second second second second	w en e extinu
Machines you can operate (office & other	-auinment)			
Migriffines And cent obetime fortune or annu	equipment/			
The state of the s	A. State	and a state of	The second	
OFFICE SKILLS			KSTUZZE Z	
If applying for a clerical position, what bu	siness equipment can you o	perate? (For example, con	nouters, copiers, etc.)	
The state of the state of the state of	at Application of the second	A Maria Alakaria	a gradient of the second	100
In what computer software programs are y	ou proficient? [Name the pr	ackage(s).]		7.70
				*
Stenographic Skills? (Yes/No)	Speed	Typing Skills?	Speed	
			Start Call	n 4
CONTROL IN PORTULATION	The second second	MANY LAKE	A CONTRACT CAMER	
GENERAL INFORMATION  Please include any other information that	way ballows should be consid			
Please include any outer unormation was	Aon deliese suomin de course	icrea:		
		-		
		:0791		
			_	
REFERENCES: Please list three person				Occupation
REFERENCES: Please list three personame	ons not related to you and Address		ployers: (Inc. Area Code)	Occupation
				Occupatio
Name	Address	Phone		Occupatio
Name  PLEASE READ THE FOLLOWING	Address  STATEMENTS CAREF	Phone	(Inc. Area Code)	
Name  PLEASE READ THE FOLLOWING	Address  STATEMENTS CAREF	Phone	(Inc. Area Code)	
PLEASE READ THE FOLLOWING  In consideration of my employm	Address  STATEMENTS CAREF	TULLY to the policies and pro	(Inc. Area Code)	nship. I underst
PLEASE READ THE FOLLOWING  In consideration of my employmentate in accepting this application	Address  STATEMENTS CAREF nent, I agree to conform n, the Township is in no	TULLY to the policies and proway obligated to provi	(Inc. Area Code)  cedures of Stowe Townide me with employment	nship. I underst
PLEASE READ THE FOLLOWING  In consideration of my employmentate in accepting this application	Address  STATEMENTS CAREF nent, I agree to conform n, the Township is in no	TULLY to the policies and proway obligated to provi	(Inc. Area Code)  cedures of Stowe Townide me with employment	nship. I underst
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment	Address  STATEMENTS CAREF  ment, I agree to conform  n, the Township is in no if offered. Furthermore	TULLY to the policies and proway obligated to provi	cedures of Stowe Town de me with employmentand that I am employ	nship. I underst nt and that I am red at will and t
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation	STATEMENTS CAREF nent, I agree to conform n, the Township is in no if offered. Furthermore can be terminated with	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and v	cedures of Stowe Town de me with employmentand that I am employ with or without notice	nship. I underst nt and that I an red at will and t at any time.
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment	STATEMENTS CAREF nent, I agree to conform n, the Township is in no if offered. Furthermore can be terminated with	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and v	cedures of Stowe Town de me with employmentand that I am employ with or without notice	nship. I underst nt and that I an red at will and t at any time.
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of its contained.	STATEMENTS CAREF nent, I agree to conform n, the Township is in no if offered. Furthermore can be terminated with o	TULLY  to the policies and proway obligated to provi , if employed, I undersor without cause, and v rue and complete to the	cedures of Stowe Town de me with employmentand that I am employ with or without notice the best of my knowledge	nship. I underst nt and that I an red at will and t at any time. se. I understand
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of its contained any falsified statements on this secondaries.	Address  STATEMENTS CAREF nent, I agree to conform n, the Township is in no if offered. Furthermore can be terminated with o in this application are to	TULLY  to the policies and proway obligated to provi , if employed, I undersor without cause, and v rue and complete to the	cedures of Stowe Town de me with employmentand that I am employ with or without notice the best of my knowledge	nship. I unders nt and that I and red at will and t at any time. se. I understand pre-employme
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of any falsified statements on this approcess will result in my application.	Address  STATEMENTS CAREF  nent, I agree to conform  n, the Township is in no  if offered. Furthermore can be terminated with o  in this application are to  application or omission o  ation being rejected, or, i	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and wrue and complete to the of fact on either this apf I am hired, may resu	cedures of Stowe Town de me with employment and that I am employ with or without notice to best of my knowledge plication or during the lt in my employment b	nship. I undersomet and that I am ved at will and that any time. The second of the sec
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of its contained any falsified statements on this secondaries.	Address  STATEMENTS CAREF  nent, I agree to conform  n, the Township is in no  if offered. Furthermore can be terminated with o  in this application are to  application or omission o  ation being rejected, or, i	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and wrue and complete to the of fact on either this apf I am hired, may resu	cedures of Stowe Town de me with employment and that I am employ with or without notice to best of my knowledge plication or during the lt in my employment b	nship. I underst mt and that I am ved at will and t at any time. e. I understand e pre-employme being terminate
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of any falsified statements on this approcess will result in my application of also understand that any offer checks, and documentation.	Address  STATEMENTS CAREF  ment, I agree to conform  n, the Township is in no  if offered. Furthermore can be terminated with o  in this application are to  application or omission o  ation being rejected, or, i  of employment is conditional	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and wrue and complete to the of fact on either this apif I am hired, may resultioned on the completic	cedures of Stowe Town de me with employment that I am employ with or without notice we best of my knowledge plication or during the it in my employment be	nship. I underst mt and that I am ved at will and t at any time. se. I understance pre-employme being terminate t tests, backgrou
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of any falsified statements on this approcess will result in my application of also understand that any offer checks, and documentation. It testing.	Address  STATEMENTS CAREF  nent, I agree to conform  n, the Township is in no if offered. Furthermore can be terminated with of in this application are to application or omission of ition being rejected, or, if of employment is condition will, upon request, sign a	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and wrue and complete to the of fact on either this apif I am hired, may resultioned on the completical necessary consent for	cedures of Stowe Town de me with employment and that I am employ with or without notice de best of my knowledge epilication or during the lit in my employment be on of pre-employment orms, including consen	nship. I understand that I am red at will and that any time.  ge. I understand pre-employment the pre-employment tests, background to for substance
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of any falsified statements on this approcess will result in my application of also understand that any offer checks, and documentation. It testing.  I hereby release all individuals as	Address  STATEMENTS CAREF  nent, I agree to conform  n, the Township is in no if offered. Furthermore can be terminated with of in this application are to application or omission of tion being rejected, or, if of employment is condition will, upon request, sign a and organizations from a	TULLY  to the policies and proway obligated to provie, if employed, I undersor without cause, and wrue and complete to the fact on either this apif I am hired, may resultioned on the completical necessary consent for any and all liability relations.	cedures of Stowe Townide me with employment that I am employ with or without notice to best of my knowledge polication or during the lt in my employment bean of pre-employment borns, including consensative to the investigation	nship. I understand at any time.  ge. I understand pre-employment tests, background tests, background to conducted by
PLEASE READ THE FOLLOWING  In consideration of my employment that in accepting this application obligated to accept employment employment and compensation of any falsified statements on this approcess will result in my application of also understand that any offer checks, and documentation. It testing.	Address  STATEMENTS CAREF  nent, I agree to conform  n, the Township is in no if offered. Furthermore can be terminated with o in this application are to application or omission o ation being rejected, or, i of employment is condit will, upon request, sign a and organizations from a to hereby permit all reco	TULLY  to the policies and proway obligated to provi , if employed, I unders or without cause, and v rue and complete to the of fact on either this ap if I am hired, may resultioned on the completic all necessary consent for	cedures of Stowe Town de me with employment itend that I am employ with or without notice to best of my knowledge plication or during the lt in my employment be on of pre-employment press, including consent ative to the investigation cerning my personal	nship. I understand at any time.  ge. I understand pre-employment tests, background tests, background to conducted by

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## STOWE TOWNSHIP

## **AUTHORIZATION TO RELEASE INFORMATION**

THIS IS TO CERTIFY THAT I,	AM AN APPLICANT FOR THE POSITION OF
	_ WITH STOWE TOWNSHIP. I DO HEREBY AUTHORIZE THI
RELEASE OF ANY AND ALL INFORMATION	to stowe township that they may request, from
WHOMEVER THEY MAY DEEM IT NECESSAR	Y TO MAKE SUCH A REQUEST, FROM ANY OR ALL OF MY
RECORDS OR FILES. SUCH INFORMATION V	VILL INCLUDE, BUT WILL NOT BE LIMITED TO: HOSPITAL
RECORDS, MEDICAL RECORDS, MILITARY	RECORDS, POLICE RECORDS, ARREST RECORDS, COURT
RECORDS, POLICE REPORTS, (INCLUDING J	uvenile records), polygraph examination reports
CREDIT REPORTS, BACKGROUND INVESTIGA	ATION MATERIAL AND REPORTS, EMPLOYMENT RECORDS
ATTENDANCE RECORDS, TRAFFIC RECORDS	B, CONFIDENTIAL RECORDS, EDUCATIONAL RECORDS AND
TRANSCRIPTS, ETC. I FURTHER RELEASE A	ny and all persons from any liability that could
RESULT FROM FURNISHING SAID INFORMATION	ON TO STOWE TOWNSHIP.
FURTHER, I AUTHORIZE STOWE TOWNSHI	P TO COPY OR OTHERWISE REPRODUCE THE ORIGINAL
DOCUMENT, AND TO LET SUCH BE COPIED OF	R OTHERWISE REPRODUCE COPIES TO ACT AS THE ORIGINAL
INSTRUMENT. THE ORIGINAL DOCUMENT	IS TO BE RETAINED ON FILE WITH STOWE TOWNSHIP
SECRETARY'S OFFICE.	
I FURTHER UNDERSTAND THAT IN THE EVER	NT MY APPLICATION IS DISAPPROVED, THE SOURCES OF THE
CONFIDENTIAL INFORMATION WILL NOT BE	
CONFIDENTIALS	
SIGNATURE	DATE
PLEASE PRINT THE FOLLOWING INF	ORMATION:
NAME	ADDRESS
SOCIAL SECURITY NO.	PHONE NUMBER
SOCIAL SECURITY NO.	FRONE NOMBER
11/00/1900	DATE