## Windsor Township 1480 Windsor Road Red Lion, PA 17356 (717) 244-3512

### APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

Please print all info	rmation					
NAME:Last	Fire	st	Middle		() Daytime Nui	
ADDRESS:				PHONE: (	· )	
			Manda		Evening Nun	
City, State	, Zip Code			I you prefer to be □ day, □ evening		_
List the title of the		vou are annivin				
			_			
Are you available f (check all that apply)		e work □ dayt me work □ eveni		porary, occasional	, or seasona	l work
	- part an	THE WORK - CVCIII	rig or riight work			
EDUCATION: Circle highest year con	mpleted: Elemer	ntary 1 2 3 4 5	6 7 8 High 9 10	11 12 College/	Tech 1 2	3 4 5
	NAME OF SCHOOL	ADDRESS	YEARS ATTENDED	DID YOU GRADUATE	MAJOR	DEGREI
HIGH SCHOOL						
COLLEGES, UNIVERSITIES OR TECHNICAL SCHOOLS						
List any other training	, seminars, corr	espondence cours	es, etc. that would	have a bearing on	your qualific	ations:
WORK HISTORY As a minimum, list all that have a bearing or Include military exper current employer will	n your qualificat ience if applicab not be contacte	ions for the work y le. Use a blank sh	you are applying for neet or an additiona mission. Start with	r, regardless of who I form if more space your present or m	en they occu ce is required	ırred. d. Your
Current or most recent employer:			Your Job Title	Your Job Title:		
Address:			Describe you	r job:		
Date Employed: Fro	om:	То:				
Name of Supervisor:			Why did you le	ave (or wish to lea	ve) this job	?
Current or Final Pay	Rate:					

Current or most recent employer:	Your Job Title:		
Address:	Describe your job:		
Date Employed: From: To:			
Name of Supervisor:	Why did you leave (or wish to leave) this job?		
Current or Final Pay Rate:			
Current or most recent employer:	Your Job Title:		
Address:	Describe your job:		
Date Employed: From: To:			
Name of Supervisor:	Why did you leave (or wish to leave) this job?		
Current or Final Pay Rate:			
Current or most recent employer:	Your Job Title:		
Address:	Describe your job:		
Date Employed: From: To:			
Name of Supervisor:	Why did you leave (or wish to leave) this job?		
Current or Final Pay Rate:			
Current or most recent employer:	Your Job Title:		
Address:	Describe your job:		
Date Employed: From: To:			
Name of Supervisor:	Why did you leave (or wish to leave) this job?		
Current or Final Pay Rate:			
☐ Check here if more information is attached For any of the previously listed schools or em	l. ployers who knew you by another name, list it here:		
Last	First Middle		
supplemental form or attach an explanation of	or which you are applying? $\ \Box$ yes $\ \Box$ no (If no, see of any accommodations needed). The employer will make nable you to perform a job. The need for a reasonable eration for employment.		

QUALIFIC	ATIONS		
1. List any licenses of	or certifications you hold	that have a bearing on your qual	ifications:
2. Have you ever ha please explain.	nd a license or certificatio	n revoked or suspended?	_yes no If yes,
3. Have you ever be	een fired or asked to resig	yn from a job?yes	_no
	of age or older?ye r school district stating ye	sno (If you are under 18 our eligibility to work.)	, you must present a
		the United States of America? _ tation verifying your eligibility.)	yesno (If
violations?ye	es no (If yes, p	guilty, to a crime other than sum lease explain below. (A convictions as a bearing on your qualification	on will not be a
the work for which	you are applying?ye	aware of which has a bearing on esno (If yes, list below or e, sex, religion, race, national ori	on a separate sheet. Do
		O KNOW YOU PERSONALLY AI TIONS, AND WHO ARE NOT RE	
NAME	HOW KNOWN	ADDRESS	PHONE #
1			
2			
3			
4			
understand that any	misrepresentation on th	formation on this form is correct is application will be cause for m , may be grounds for my dismiss	e to be removed from
		Signature	Date

# PLEASE ANSWER THE QUESTIONS ON THIS PAGE ONLY IF THEY ARE APPLICABLE TO THE TYPE OF WORK YOU ARE APPLYING FOR.

## **Application Supplement**

## **Essential Function Information**

Position of perform following functions:	requires that you be able to
exposure to inclement weather; exposure	cluding talking, reading, writing, listening, seeing; to stressful situations; operating a vehicle; ag products or services at a specified rate of
<b>THE APPLICANT:</b> I have reviewed the above list of job funct   I can fully perform all the functions.	tions and believe that:
□ I cannot perform all the functions. (Che disqualified for this job. Please explain be we should be aware.)	ecking this box may result in your being low if there are additional considerations of which
	Signature Date