



Millcreek Township
3608 West 26th Street
Erie, PA 16506
(814)833-1111

Employment Application

We are an Equal Opportunity Employer

Please print in ink. You must complete the entire application.

Date Received:

Applicant Information

Name (first, middle initial, last)

Address (street, city, state, zip code)

Phone Number(s)

Email Address

Are you legally authorized to work in the U.S?
If hired you will be required to provide proof of work
authorization.

Yes

No

Are you at least 18 years old?

Yes

No

If not, your employment will be subject to verification that you meet state/federal minimum age requirements for the type of work you are applying for and have obtained a valid work permit.

Have you ever applied for employment at the Township before?

Yes

No

If yes, when:

Have you ever worked at the Township before?

Yes

No

If yes, when:

Position Applying For

Position

Part-Time or Full-Time

What days or shifts are you available to work?

How did you hear about our opening?

Special Skills

If relevant, please describe your typing speed, software knowledge, and office equipment experience.

If relevant, please describe your experience with using hand tools and the types of equipment you have operated.

Education			
School	Name and Location (city, state)	No. Years Attended	Diploma or Degree Received
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No
			Type:
College			<input type="checkbox"/> Yes <input type="checkbox"/> No
			Type:
Graduate			<input type="checkbox"/> Yes <input type="checkbox"/> No
			Type:
Other (specify)			<input type="checkbox"/> Yes <input type="checkbox"/> No
			Type:

Training Courses			
List any relevant training programs completed.			
Course/Seminar	Sponsoring Organization	Content	Date(s) Attended

Required License(s)			
If you required to drive a motor vehicle for the job you are applying for, state your:			
Driver's License Number	State Issued	Expiration	
Commercial Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, what class CDL?	<input type="checkbox"/> A <input type="checkbox"/> B	
Are you licensed with any group, association or society relating to the job for which you are applying?			<input type="checkbox"/> Yes <input type="checkbox"/> No
Registration or License Type	Registration or License Number	State Issued	Expiration Date
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Registration or License Type	Registration or License Number	State Issued	Expiration Date

Employment History (Start with most recent; use separate sheet if necessary)

Name of Employer	Phone Number
Address	
Job Title	Employment Date (month and year)
Name of Immediate Supervisor	From To
Description of Duties	
Reason for Leaving	
If currently employed, may we contact as a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Name of Employer	Phone Number
Address	
Job Title	Employment Date (month and year)
Name of Immediate Supervisor	From To
Description of Duties	
Reason for Leaving	

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Address	
Job Title	Employment Date (month and year)
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Name of Employer	Phone Number
Address	
Job Title	Employment Date (month and year)
Name of Immediate Supervisor	From To
Description of Duties	
Reason for Leaving	

Employment References (List individuals familiar with your job qualifications (other than relatives or personal friends).	
Name	Phone Number
Address	
Relationship	How long known?
Name	Phone Number
Address	
Relationship	How long known?
Name	Phone Number
Address	
Relationship	How long known?

Please Read Carefully Before Signing This Form

1. All information I have provided in this application and otherwise in conjunction with my application for employment is true, complete, and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
2. I expressly authorize the Township, its representatives, employees, or agents to investigate my responses on this application and contact any or all my former employers or any individuals familiar with me or my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information, whether favorable or unfavorable, about me or my employment. I voluntarily and knowingly fully release and hold harmless any person or organization providing information pertaining to me or my employment.
3. I understand that, if I receive an offer of employment, I may be required to undergo a physical examination and drug screening. (Note: If this is a job requirement, you will be notified.)
4. Regardless of whether or not I become employed by the Township, I recognize that this application is not and should not be considered a contract of employment. I understand that employment at the Township is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the Township's, unless specifically provided otherwise in a written employment contract or collective bargaining agreement. I further understand that no Township employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an official of the Township, with approval from the Board of Supervisors, and then only by means of a signed, written contract that is expressly stated to be an employment contract.
5. The Township reserves the right to require additional information in the event an offer of employment is made, including but not limited to inquiries about criminal history.
6. This application is valid for 60 days from the date below.

Signature of Applicant _____ **Date** _____

Thank you for your interest in Millcreek Township.

**MILLCREEK TOWNSHIP
EMPLOYMENT APPLICATION SUPPLEMENT - EMPLOYMENT OF RELATIVES**

To reduce the potential for conflicts of interest, no relative of any Elected Official, Department Head, or Appointed Official under the Second-Class Township Code will be eligible for employment with Millcreek Township.

For purposes of this policy, "relatives" include the applicant's spouse, son, daughter, mother, father, brother, sister, grandparent, grandchild, stepparent, stepchild, stepsister, stepbrother, in-laws, aunt, uncle, nephew, niece and first cousin.

A "Department Head" is a supervisory employee of the Township with overall responsibility for a recognized subdivision of Township operations, including but not limited to the Chief of Police.

Do you have any relatives employed by Millcreek Township?

Yes No

If yes, complete the following:

Name of Relative	Job Title	Department	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I have read and understand the above policy regarding the non-employment of relatives. I certify that the information I have provided on this form is true, accurate and complete to the best of my knowledge and that my employment by Millcreek Township would not violate this policy.

Signature

Date

Printed Name