

## **Application For Employment**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.

	(PLEASE PRI	INT OR TYPE)			
Position Applied For:			Date of A	pplication:	
How Did you Learn About Us?					
Θ Newspaper	Θ Friend/Relative	Θ Walk-in			
Θ Newsletter	Θ Internet	<b>9</b> Other:			
Last Name:	First Name	First Name:		Middle Name:	
Address	Street	City	State	Zip Code	
Telephone Number(s)			Soc	ial Security Number	
If you are under 18 years of a	ge, can you provide requ	ired proof of your eli	gibility to work?	( )Yes ( )No	
Have you ever been employed with us before? ( ) Yes ( ) No If Yes, give date:					
Are you currently employed? .				( ) Yes ( ) No	
May we contact your present e	employer?			( ) Yes ( ) No	
Are you prevented from lawful (Proof of citizenship of immigr	9 . ,	•		0	
On what date would you be av	ailable for work?				
Are you available to work: (	) Full Time (	) Part Time (	) Temporary/S	Seasonal	
Are you currently on "lay-off" s	status and subject to reca	ıll?		. ( ) Yes ( ) No	
Have you been convicted of a	crime within the last 7 years	ears?		. ( ) Yes ( ) No	
If Yes, please explain					

Education & Tra	aining			
	Name of	Address	Course	Diploma
	School		of Study	Degree
High				
School		1		
				1
Vocational				
School				
		1		
Undergraduate				
College		_		<b></b>
C 1 4-				
Graduate				
Professional				<u> </u>
Interest in the Te	ownship of Derry			
		l verst swith the T	1 : f D.	
Describe	e why you are interested i	n employment with the 1	ownship of De	erry.
Specialized Train	ning			
_	y specialized training rela	ted to the position for wh	nich vou are a	pplying.
	<i>y</i>			PP-7- 5
~- 4==				
Special Skills and				
Summarize specia	al skills and qualifications	s acquired from employm	ent or other e	xperiences.

## **Employment Experience**

Start with your most recent position. Include any job-related military service assignments. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

Employer	Telephone	Dates Employed		
	-	From	To	<b>Work Performed</b>
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				
<b>Employer</b> Telephone		Dates Employed		
		From	To	<b>Work Performed</b>
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				
Employer	nployer Telephone Dates Employed		nployed	
		From	To	Work Performed
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				
Employer	Telephone	Dates Employed		
		From	To	Work Performed
Address				
Job Title		Hourly Rate/Salary		
		Starting	Final	
Supervisor				
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

## References

	<u>Name</u>	<b>Occupation</b>	Telephone #	
Personal:				
Personal:				
Previous Employer:				
Applicant's Stateme	nt			
I certify that answers give	n herein are true and complete	e to the best of my knowledge.		
I authorize investigation o an employment decision.	f all statements contained in t	this application for employment a	s may be necessary in arriving at	
reputation, and financial a all medical, physical and r photostats of same if requi	nd credit status be furnished t nental records or reports inclu	concerning my work record, school to the Derry Township Police Deputing all information of a confide e used to assist the Derry Townshon I am seeking.	partment. This includes any and ntial or privileged nature, and	
I hereby release all organizinformation requested abo	<del>_</del>	bility or damages which may resu	lt from furnishing the	
		employment from the employer of cuted by the employer and employer		
¥ •		nisleading information given in m quired to abide by all rules and re	• • •	
statement which he does		misdemeanor of the third degreer pursuant to a form bearing no able.		
Signature of Applicant		Date	_	
The Derry Township Police Department will be sending a packet of information after receiving your application. Please indicate below whether you would like to receive the information by email or have it mailed to the address on the application.				
Email:		I	Mailed	