



**SECTION III: EMPLOYMENT HISTORY**

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Beginning with your most recent job, list your work history for the past ten years:

_____ Employer's Name	Dates Employed: _____ From _____ To _____
_____ Street Address	Job Title: _____ Beginning _____
_____ City/State/Zip	Ending _____
(_____) _____ Phone Number	Your Salary: \$ _____ Beginning _____
_____ Supervisor's Name	\$ _____ Ending _____

Describe your duties, responsibilities and authority for position(s) held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your reason(s) for leaving:

\_\_\_\_\_  
\_\_\_\_\_

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_____ Employer's Name	Dates Employed: _____ From _____ To _____
_____ Street Address	Job Title: _____ Beginning _____
_____ City/State/Zip	Ending _____
(_____) _____ Phone Number	Your Salary: \$ _____ Beginning _____
_____ Supervisor's Name	\$ _____ Ending _____

Describe your duties, responsibilities and authority for position(s) held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your reason(s) for leaving:

\_\_\_\_\_  
\_\_\_\_\_

**SECTION III: EMPLOYMENT HISTORY (continued)**

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Employer's Name \_\_\_\_\_ Dates Employed: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Street Address \_\_\_\_\_ Job Title: \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Beginning \_\_\_\_\_  
Ending \_\_\_\_\_  
( ) \_\_\_\_\_ Your Salary: \$ \_\_\_\_\_  
Phone Number \_\_\_\_\_ Beginning \_\_\_\_\_  
Ending \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ \$ \_\_\_\_\_  
Ending \_\_\_\_\_

Describe your duties, responsibilities and authority for position(s) held:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your reason(s) for leaving:  
\_\_\_\_\_  
\_\_\_\_\_

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Employer's Name \_\_\_\_\_ Dates Employed: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Street Address \_\_\_\_\_ Job Title: \_\_\_\_\_  
City/State/Zip \_\_\_\_\_ Beginning \_\_\_\_\_  
Ending \_\_\_\_\_  
( ) \_\_\_\_\_ Your Salary: \$ \_\_\_\_\_  
Phone Number \_\_\_\_\_ Beginning \_\_\_\_\_  
Ending \_\_\_\_\_  
Supervisor's Name \_\_\_\_\_ \$ \_\_\_\_\_  
Ending \_\_\_\_\_

Describe your duties, responsibilities and authority for position(s) held:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your reason(s) for leaving:  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION IV: EDUCATION PROFILE**

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A. List all high schools, vo-technical schools and colleges attended:

<u>NAME</u>	<u>CITY/STATE/ZIP</u>	<u>YEARS COMPLETED</u>	<u>GRADUATED (YES / NO)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Major and Minor Courses:

\_\_\_\_\_

\_\_\_\_\_

B. Other accredited schools or training (trade, vocation, military). List subjects studied, certificate(s) earned, and any other pertinent data.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION V: SPECIAL QUALIFICATIONS AND SKILLS**

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A. List any special skills you possess; machines and equipment you can use; and licenses you hold. (For example, vehicle inspection mechanic, scientific or professional devices, mechanic's license, heavy equipment operations (specific types), welding, computer literacy, landscaping, etc.)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

B. Foreign language skills: Enter language and indicate fluency:

<u>Language</u>	<u>Reading</u>	<u>Speaking</u>	<u>Understanding</u>	<u>Writing</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**SECTION VI: MILITARY STATUS**

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Have you served in and are you a veteran of the U.S. Armed Forces?  Yes  No

A. While in the military service, were you ever convicted for any crime graded as a misdemeanor or felony?  Yes  No

If yes, give detailed information on charges and action taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SECTION VI: MILITARY STATUS (continued)**

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B. Are you presently a member of a U.S. Reserve or State Guard organization?  Yes  No  
If yes, complete the following:

Grade and Service No.: \_\_\_\_\_

Service and Component: \_\_\_\_\_

Organization and Station or Unit and address: \_\_\_\_\_

Indicate reserve obligation, if any: \_\_\_\_\_

**SECTION VII: BACKGROUND INFORMATION**

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A. CONVICTION OF CRIME: Have you ever been convicted of a misdemeanor, felony or greater criminal violation?  Yes  No If yes, state violation, court of jurisdiction and date of conviction:

\_\_\_\_\_  
\_\_\_\_\_

B. EMPLOYMENT DISCHARGE: Have you ever been discharged, asked to resign, furloughed, or put on inactive status for cause, or subject to disciplinary action while in any position (except military)?  Yes  No If yes, state reason:

\_\_\_\_\_  
\_\_\_\_\_

C. CHARACTER REFERENCES: List three character references (Do not list relatives, former employers, or persons living outside the United States),

NAME ADDRESS HOME PHONE WORK PHONE YEARS KNOWN

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. PROFESSIONAL REFERENCES: List three professional references and only individuals who have definite knowledge of your qualifications for the position of application.

NAME ADDRESS HOME PHONE WORK PHONE YEARS KNOWN

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**SECTION VIII: MISCELLANEOUS**

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The following information will be used only if it is directly related to the classification/position for which you are applying:

1. If listed as a primary job requirement, are you willing and able to secure a Pennsylvania Motor Vehicle Operator's License and/or a Commercial Driver's License?  Yes  No
2. Can you perform the primary job requirements of the specific job for which you are applying with or without accommodations?  Yes  No

**SECTION VIII: MISCELLANEOUS (continued)**

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3. Have you previously filed an application with the Authority? \_\_\_\_ Yes \_\_\_\_ No  
If yes, provide year and position for which you applied:

Year: \_\_\_\_\_ Position: \_\_\_\_\_

4. Have you previously been employed with the Authority? \_\_\_\_ Yes \_\_\_\_ No  
If yes, provide dates of employment and position:

From: \_\_\_\_\_ To: \_\_\_\_\_ Position: \_\_\_\_\_

5. Do you have any family members working for this Authority? \_\_\_\_ Yes \_\_\_\_ No

6. Have you attended school or worked under another name? \_\_\_\_ Yes \_\_\_\_ No

7. Are you a U.S. citizen or an alien authorized to work in the U.S.A.? \_\_\_\_ Yes \_\_\_\_ No

**READ CAREFULLY AND CHECK APPROPRIATE BOX:**

Applicants for various positions may be required to have a background and/or criminal history check.

- I authorize a background and/or criminal history check.
- I DO NOT authorize a background and/or criminal history check

**I solemnly swear that all of the information furnished in the Employment Application and supplements thereto, is true, accurate and complete to the best of my knowledge. I understand that any misrepresentation or falsification of the information provided may lead to withdrawal of an employment offer or termination following employment.**

**I hereby authorize the employers, schools, and other references' names in the application to provide information regarding me and to release personnel, academic and other records concerning me.**

\_\_\_\_\_  
Applicant Name (Print)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Application may be mailed or delivered in person to: East Cocalico Township Authority  
102 Hill Road  
Denver, PA 17517

Application may also be emailed to: [water@ecocalicotwpaauth.com](mailto:water@ecocalicotwpaauth.com)