TOWNSHIP OF MARPLE APPLICATION FOR EMPLOYMENT

(AN EQUAL OPPORTUNITY EMPLOYER)

MARPLE TOWNSHIP REQUIRES APPLICANT TESTING FOR DRUG USE

DATE					
Name			Social	Security Number	
(Last)	(First)	(MI)			
Address	ress		Tele	ephone Number	
(Street) (City, State & Zip)					
	(oity, state & Zip)				
Job applying for				May we contact your last employer?	
Minimum salary expected	\$			YES NO	
Average at High Oak and Oar deads O	I		,		
Are you a High School Graduate? YES NO	SCHOOLS ATTENDED				
CIRCLE HIGHEST LEVEL COMPLETED		NAME	NO. YRS	DIPLOMA OR TYPE OF DEGREE	
High School 1 2 3 4					
College 1 2 3 4					
Graduate School 1 2 3 4					
Other 1 2 3 4					
List any special skills					
List any physical disabilities which could adversely affect your work in the position for which you are applying?					
Have you ever been employed by Marple Township of Marple? YES NO When Where					
Have you ever been convicted of a cri	iminal offense relating	g to a previous job or employment?	? If yes, pleas	e explain	
Have you ever had any U.S. Military S	ervice?	Branch of Service	Date	es of Service	
YES NO			From	To	
Person to be notified In case of emergency					
	lame)	(Address)		(Phone)	
Please list persons whom we may con	ntact who know your c		Dhono		
Name		Address	Phone		
Name		Address	Phone		
Name		Address	Phone		

PREVIOUS EMPLOYMENT RECORD

(LIST YOUR LAST EMPLOYER FIRST)

Employer's Name		Employer's Address	Phone			
Start Date	Leaving Date	Reason for Leaving				
Job Title	Starting Rate	Leaving Rate	Name of supervisor			
Description of Dutie	<u> </u> 98					
Employer's Name		Employer's Address	Phone			
Start Date	Leaving Date	Reason for Leaving				
Job Title	Starting Rate	Leaving Rate	Name of supervisor			
Description of Dutie	Description of Duties					
Employer's Name		Employer's Address	Phone			
Start Date	Leaving Date	Reason for Leaving				
Job Title	Starting Rate	Leaving Rate	Name of supervisor			
Description of Duties						
APPLICANT'S STATEMENT						
I understand that if employed, Marple Township does not guarantee that such employment will last any definite length of time. I certify that all statements herein are made truthfully and without evasion and further agree that such statements may be invested and if found to be false will be sufficient reason for my dismissal, and do further agree, if employed, to abide by the rules and policies of Marple Township.						
Date			Applicant Signature .			
This small set	on will romain cative for any	1) year If you wish to be someidered for	ample wort of tarthic paried was result.			
	m will remain active for one (1) year. If you wish to be considered for e	employment after this period, you must reapply.			