GENERAL EMPLOYMENT APPLICATION

Butler Township Board of Supervisors
PO Box 339
Biglerville PA 17307
717-677-6712
butlertwp@comcast.net

Applicant Information

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) -

Email Address: _____

Date Available to Start: _____

Position Applied For: _____

Desired Salary: $_____

Employment Eligibility

Are you legally authorized to work in the United States? □ Yes □ No

Will you now or in the future require sponsorship for employment visa status? □ Yes □ No

Education

High School: _____

Diploma: □ Yes □ No Graduation Year: _____

College/University: _____

Degree: _____ Graduation Year: _____

Other Training/Certifications: _____

Employment History *(Most Recent First) Please provide a resume*

Employer: _____

Job Title: _____

Dates Employed: From _____ To _____

Supervisor's Name & Title: _____

Phone: _____ May we contact? □ Yes □ No

Reason for Leaving: _____

(Repeat for up to 3 prior employers if needed)

References

(Provide at least two professional references)

Name: _____ Relationship: _____

Company: _____ Phone: _____

Name: _____ Relationship: _____

Company: _____ Phone: _____

Consent & Acknowledgements

I certify that the information I have provided in this application is true and complete to the best of my knowledge. I understand that any false or misleading information may result in disqualification from consideration or termination of employment if hired.

I authorize Butler Township to verify all statements contained in this application and to contact previous employers and references listed above unless otherwise indicated.

I understand that employment with Butler Township is at-will, meaning either I or the company can terminate the relationship at any time, with or without cause or notice.

Consent to Drug Testing and Background Check

I understand that, as a condition of employment, I may be required to undergo a **background check** and **pre-employment/random drug testing**. I voluntarily consent to these procedures and release Butler Township, its agents, and all parties from liability arising from such investigations or test results. I understand that a positive drug test or disqualifying background information may result in denial or termination of employment.

Signature of Applicant: _____

Date: _____