

We consider applications for all positions without regard to actual or perceived ethnicity, race, color, ancestry, religion, national origin, gender, gender identity or expression, marital or familial status, age, sexual orientation, mental or physical disability, use of guide or support animals or mechanical aids and/or source of income.

(PLEASE PRINT)

| Last Name | First Nar | ne | Middle Name | | |
|--|--|-------------------------------------|------------------------|----------|--|
| | | | | | |
| Address Number | Street | City | State 2 | Zip Code | |
| Telephone Number(s) | Foreign | | Social Security Number | | |
| (H) (C) | Email | | Social Security Number | | |
| Position(s) Applied For | | | Date of Applicat | ion | |
| | | | | | |
| How did you learn about us? Advertisement | ☐ Relative | ☐ Inquiry | | | |
| ☐ Employment Agency | ☐ Friend | | | | |
| | | | | AM | |
| Best time to contact you bet | • | | R | PM | |
| If you are under 18 years of | age, can you provid | le required proof of elig | ibility to work? \Box | □No | |
| Have you ever filed an appli | cation with us befor | re? | Yes | □No | |
| If Yes, give date | | | | | |
| Have you ever been employe | Have you ever been employed with us before? ☐ Yes ☐ No | | | | |
| If Yes, give date | | | | | |
| Do any of your friends, relat | ives, or spouse wor | k here? | Yes | □No | |
| If Yes, who? | | | | | |
| Are you currently employed? |) | | Yes | □No | |
| May we contact your presen | t employer? | | Yes | □No | |
| Can you lawfully become em Proof of citizenship o | | ntry? Is will be required upon e | | □No | |
| Date available for work | // Wha | at is your desired salary | range? | | |
| Are you applying for: F | ull-Time | | | | |
| □ P | art-Time | | | | |
| □s | ummer Help (Plea | ase indicate dates availa | ble/ | /) | |
| Are you currently on "lay-off | " status and subject | t to recall? | Yes | □No | |

EDUCATION

| | Name and Address of School | Course of Study | Number of Years Completed | Diploma Degree |
|----------------------------|-------------------------------|----------------------------|---------------------------------|-------------------|
| Elementary School | | | | |
| High School | | | | |
| Undergraduate College | | | | |
| Graduate Professional | | | | |
| Other (Specify) | | | | |
| Describe any specialized (| raining, apprenticeship, s | skills and extra-curricula | r activities. | |

| Other (Specify) | | | | |
|-----------------------------|----------------------------|-----------------------------|---------------|--|
| Describe any specialized to | raining, apprenticeship, s | skills and extra-curricular | ° activities. | |
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| | | | | |
| Describe any job-related to | raining received in the U | nited States military. | | |
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EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

| 1. | Employer | | Date From | es Employ | | Work Perfort | ned |
|----|--|-------------------|--------------------|------------|-------------|------------------------|------------|
| | Address | | | | | | |
| | Telephone Number(s) | | Hour Starti | y Rate/Sa | | | |
| | Job Title | Supervisor | | | | | |
| | Reason for Leaving | | | | | | |
| 2. | Employer | | - Date Fro | es Employ | | Work Perform | ned |
| | Address | | | | | | |
| | Telephone Number(s) | | Hour Start | ly Rate/Sa | | | |
| | Job Title | Supervisor | | | | | |
| | Reason for Leaving | | | | | | |
| 3. | Employer | | Dat Fro | es Employ | | Work Perforr | ned |
| | Address | | | | | | |
| | Telephone Number(s) | | Hour Start | ly Rate/Sa | | 4 | |
| | Job Title | Supervisor | | C. | | | |
| | Reason for Leaving | | | | | | |
| 4. | Employer | | Dat Fro | es Employ | | Work Perfort | ned |
| | Address | 9 | - | | | | |
| | Telephone Number(s) | | Hour Start | ly Rate/Sa | | | |
| | Job Title | Supervisor | | | | | 97 |
| | Reason for Leaving | | | | | | |
| | If you nee | ed additional spa | ace, please contin | ie on a s | separate sh | eet of paper. | |
| | : | | | J - CC: | - ll-l | | |
| Y | List professional, tr You may exclude membe | | | | | e, ancestry, disabilit | y or other |
| 1 | protected status: | | | | | | - |
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ADDITIONAL INFORMATION

| Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING Can you perform the essential functions of the job, for which you are applying, either with or without a reasonable accommodation? YESNO | Other Qualification | ons | | | | |
|--|--|-----------------------------------|------------------------------------|---------------------|---------------------------------------|-----|
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| Arrange Interview: \(\subseteq \) | es □No | | |
| Remarks: | | | |
| Employed: Yes No | Date of Employment | | |
| Job Title | Hourly Rate/ Salary | Department | |
| Ву | | | |
| NAME AND TITLE | | DATE | |
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FOR PERSONNEL DEPARTMENT USE ONLY

If applicable Print and File the most recent PA State Form SP 4-164 'Request for Criminal Record Check'

| NOTES |
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I hereby authorize the Borough of Conshohocken to have the Pennsylvania State Police do a criminal Background check. Print Name: (Middle) (Last) Current Address Since: (Mo/Yr) (Street) (City) (State/Zip) Previous Address From: (Mo/Yr) (City) (Street) (State/Zip) Social Security Number:_____DOB: _____ Telephone Number: Drivers License Number: State: Date: Signature: Applicant's Statement I certify that answers given herein are true and complete. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 1 year. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Borough of Conshohocken is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the Borough. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Employer. Signature of Applicant Date

CRIMINAL BACKGROUND CHECK AUTHORIZATION