

MILTON REGIONAL SEWER AUTHORITY Employment Application

An Equal Opportunity Employer

Today's Date: _____ Date available for employment: _____

Position applying for: _____
(You will be considered for this position only.)

NOTE: This application will expire one year after today's date. If you wish to be considered for a position after that time, you must submit a new application.

We will check employment, education, and other references, so please be accurate.

Personal Data

Name

Last	First	Middle Initial
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Address

Number/Street	City	State	Zip Code
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Email Address:

Telephone Numbers: Home: () _____ Work: () _____ Cell: () _____

Are you 18 years or older? Yes _____ No _____

Under the Immigration Reform and Control Act of 1986, the Milton Regional Sewer Authority is required to verify employment eligibility. If employed, can you provide employment eligibility documents?

Yes _____ No _____

NOTE: The Milton Regional Sewer Authority does not discriminate on the basis of citizenship or national origin. In completing this application for employment, you may exclude information that indicates race, color, religion, sex, age, national origin, disability or marital status.

Education and Training

School	Address	Highest Grade Completed
High School:	_____	9 10 11 12 Graduated? Yes _____ No _____
College or Trade School:	_____	13 14 15 16 Degree Received _____ Major _____ Minor: _____

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Other Schools or Specialized Training

School	Address	Course of Study
_____	_____	_____
_____	_____	_____

What other education, training, or experience have you had that will enable you to perform the job for which you have applied? _____

General Information

Have you ever plead guilty to or been convicted of a crime (exclude minor traffic violations for which a fine or forfeiture of \$50.00 or less was imposed)? Yes _____ No _____

If yes, please explain and give in each case the date, nature of the offense, the name and location of the court, the penalty imposed if any, and the disposition of the case. A plea of guilty or a conviction will not necessarily be a bar to employment and factors such as age and time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account.

Are you able to perform the duties of the job for which you are applying? (See job description)

Yes _____ No _____

If "No," please indicate the specific duties you cannot perform: _____

Have you ever applied for employment with the Milton Regional Sewer Authority or Milton Wastewater Treatment Plant before? Yes _____ No _____

If "Yes", When _____ Where _____

Have you ever been an employee of the Milton Wastewater Treatment Plant? Yes _____ No _____

If yes, position _____ From _____ to _____

Supervisor's name _____ Reason for leaving _____

Please list any additional information that you think we should consider in evaluating your application for employment.

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Work History

Please provide a complete employment history, listing all positions held, including military, part-time, summer, and volunteer; use additional sheets if necessary.

A) Current or most recent position: _____

Employers Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____

B) Former positions:

1) Employer's Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____

2) Employer's Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____

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For Additional Employment Information use additional sheets if necessary.

I certify that I have read this form in its entirety and that the information I have provided is true, accurate, and complete to the best of my knowledge. I understand that, should any statement I have made prove to be false, misleading, or erroneous, it may result in the rejection of my application or in my discharge if I am employed regardless of when the false, misleading or erroneous information is discovered.

I further understand and agree that this application is not a contract for employment, and that any individual hired by the Milton Regional Sewer Authority may voluntarily leave his or her employment or may be terminated by the Milton Regional Sewer Authority at any time for any reason. I understand that, other than a written agreement signed by the Milton Regional Sewer Authority Board and Milton Regional Sewer Authority Chairman, any oral or written statements to the contrary are not valid, are expressly disavowed, and should not be relied upon by any prospective or existing employee.

Signature

Date

I give the Milton Regional Sewer Authority permission to check references and verify information provided in this employment application.

Signature

Date

Return application to:

**Ronda Bogle
Milton Regional Sewer Authority
5585 State Route 405
Milton, PA 17847**

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ADDITIONAL EMPLOYMENT INFORMATION:

Employer's Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____

Employer's Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____

Employer's Name: _____

Address: _____

Telephone: _____ Dates of employment: from _____ to _____
Month/Year Month/Year

Salary: _____ Average hours per week: _____

Name & title of supervisor: _____

Job titles & duties: _____

Reason(s) for leaving: _____