



## APPLICATION FOR EMPLOYMENT

### Logan Township, Blair County

100 Chief Logan Circle, Altoona, PA 16602

Phone: 814-944-5349, Fax: 814-949-3352

(Please print in ink or type)

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Last Name	First Name	MI	Today's Date
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Address	City	State	Zip Code
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Phone Number	Social Security Number
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Are you over 18?  Yes  No

Have you ever been convicted of, or pled guilty or nolo-contendere to a felony or a misdemeanor charge  Yes  No. If yes, please list the date and nature of each offense, the name and location of the court, and the penalty imposed or other disposition of the case. \_\_\_\_\_

Any conviction or guilty plea will be considered only insofar as it relates to your suitability for employment in the position for which you are applying.

Have you ever been employed by the Township of Logan before?  Yes  No If yes, please complete information below.

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Date From	To	Department/Bureau	Name of Supervisor
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Are you seeking  Full-time  Part-time  Temporary Employment

Do you have a legal right to live and work in the U.S.?  Yes  No An Employment Eligibility Verification Form I-9 is attached.

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Type of Work Desired:

1<sup>st</sup> Choice \_\_\_\_\_ 3<sup>rd</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_ 4<sup>th</sup> Choice \_\_\_\_\_

**\*AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER\***

Certain jobs within Township service require a physical examination. If the job(s) for which you are applying requires such, are you willing to take a physical examination at the Township's expense?  Yes  No

Certain jobs within Township service require a background investigation. If the job(s) for which you are applying requires such, are you willing to have a background investigation performed?  Yes  No

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**EDUCATION AND TRAINING**

School Name	Location	Dates Attended	Graduated? (Yes/No)	Type of Degree Specialization
High School: _____				
GED OR CLEP: _____				
College or University: _____				

Other: \_\_\_\_\_  
 Military Service: \_\_\_\_\_  
 Type of Discharge: \_\_\_\_\_

List trade or professional organizations, of which you are a member, including offices held if applicable and professional licenses and certificates you consider significant. List specialized training if appropriate—e.g., typing, shorthand, word processing, office machines, apprenticeships, or skills not indicated already. Do not include any organization whose name may indicate your race, color, religion, sex, age, national origin, physical or mental handicap, or veteran's status. \_\_\_\_\_

Typing Speed \_\_\_\_\_ words per minute.

Are you willing to work rotating shifts?  Yes  No

Are you willing to move within the corporate limits of the Township of Logan within one (1) year of hire date if employed?  Yes  No

Certain jobs within Township service require a driver's license. If the job(s) for which you are applying require such, do you possess a current Pennsylvania driver's license?  Yes  No  
 Class \_\_\_\_\_

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**EMPLOYMENT HISTORY**

Please do not include data on employers you left more than 10 years ago. Begin with the present or latest employer.

Firm Name and Address	Phone No.	Starting Salary	Final Salary	
Nature of Business	Dates Employed:		From	To
Describe Your Duties				
Name & Title of Your Immediate Supervisor		Your Reason for Leaving		

<b>Firm Name and Address</b>	<b>Phone No.</b>	<b>Starting Salary</b>	<b>Final Salary</b>
<b>Nature of Business</b>	<b>Dates Employed:</b>		<b>From To</b>

**Describe Your Duties**

<b>Name &amp; Title of Your Immediate Supervisor</b>	<b>Your Reason for Leaving</b>
<b>Firm Name and Address</b>	<b>Phone No. Starting Salary Final Salary</b>

<b>Nature of Business</b>	<b>Dates Employed:</b>		<b>From To</b>
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**Describe Your Duties**

<b>Name &amp; Title of Your Immediate Supervisor</b>	<b>Your Reason for Leaving</b>
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If you need additional space, please print or type the information on plain white paper.

May we contact your present employer?  Yes  No

Are you willing to accept the currently established wage for the job(s) you are seeking?

Yes  No

Please list any other pertinent facts you wish to present, which may help us to evaluate your qualifications for the job(s) you are seeking. \_\_\_\_\_

I certify that the information I have given is complete, true and correct to the best of my knowledge and belief. I further affirm that I have not knowingly withheld any facts or circumstances in completing this application. I understand that any misrepresentation of information may cancel this application or be cause for termination in the event I am employed by the Township.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Note: All applications will remain in the active file for a period of six (6) months.

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**LOGAN TOWNSHIP IS AN EQUAL OPPORTUNITY EMPLOYER AND DOES NOT DISCRIMINATE ON THE BASIS OF RACE, COLOR, RELIGION, AGE (AGE 40 AND OVER) OR SEX (EXCEPT WHERE AGE OR SEX MAY BE A BONAFIDE OCCUPATIONAL QUALIFICATION), NATIONAL ORIGIN, NON-JOB RELATED PHYSICAL OR MENTAL HANDICAP OR VETERAN'S STATUS.**

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FOR OFFICIAL USE ONLY

Educational Level	<input type="checkbox"/>	<input type="checkbox"/>		
Jobs Applied For	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Jobs Qualified For	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Reason for Disqualification	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_