



# TOWNSHIP OF LOWER PROVIDENCE

## APPLICATION FOR EMPLOYMENT

### An Equal Opportunity Employer

Lower Providence Township considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability or any other legally protected status.

This application will be kept on file for one year. It is the applicant's responsibility to ensure that a current application is on file.

**Position(s) Applying For:**

Full-time or Part-time

1.	_____	_____
2.	_____	_____
3.	_____	_____

**Personal Information**

Name	_____	_____	_____
	(Last)	(First)	(Middle)
Current Address	_____		
	(Street)		
	_____		_____
	(City)	(State)	(Zip)
Permanent Address (if different than Current)	_____		
	Street		
	_____		_____
	(City)	(State)	(Zip)
Home Phone	_____		
	Cell Phone		
	_____		
	Email		
	_____		

**ADDITIONAL INFORMATION**

Are you permitted to be lawfully employed in the United States?  Yes  No  
(Proof of citizenship or immigration status will be required upon employment.)

Have you ever filed an application with the Township before?  Yes  No

Have you ever worked for the Township before?  Yes  No If yes, please state dates of employment and department \_\_\_\_\_

Are you 18 years of age or over?  Yes  No

Driver's License # \_\_\_\_\_ State \_\_\_\_\_ Class/Type \_\_\_\_\_

Is your driver's license valid?  Yes  No

Are you a veteran of any branch of the United States Armed Forces?  Yes  No

Have you ever been convicted of a felony or misdemeanor?  Yes  No

If yes, please explain:

\_\_\_\_\_  
(Conviction will not necessarily disqualify applicant from employment.)  
\_\_\_\_\_

When will you be available to start employment? \_\_\_\_\_

How did you hear about the job?

Job Board- LinkedIn, Indeed, etc.

Lower Providence Township website

Employee Referral Referred by: \_\_\_\_\_

Other

**EDUCATION:**

**High School**

\_\_\_\_\_  
Name & Location of School

\_\_\_\_\_  
Number of Years Completed Did you graduate?

**College/University**

\_\_\_\_\_  
Name & Location of School

\_\_\_\_\_  
Number of Years Completed Did you graduate? Major/Degree Earned

**Other (Including Post Graduate Education)**

\_\_\_\_\_  
Name & Location of School

\_\_\_\_\_  
Number of Years Completed Did you graduate? Major/Degree Earned

**SKILLS AND TRAINING**

Please list all applicable skills ~~DO NOT WRITE~~

~~KPD~~ ~~STILL~~ ~~LEAVE~~

~~HKS~~

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Can you work overtime? Yes No

**EMPLOYMENT**

List your most recent (or present) job first, and all others in descending order in the past 10 years. Be sure to list all employment, including military service. If additional space is required, please attach additional documentation. All information below must be completed.

1.

Company Name		Company Address	
Phone Number	Job Title	Supervisor	
Job duties	Dates: From	To	
		\$	
Reason for Leaving	Salary		

2.

Company Name		Company Address	
Phone Number	Job Title	Supervisor	
Job duties	Dates: From	To	
		\$	
Reason for Leaving	Salary		

3.

Company Name		Company Address	
Phone Number	Job Title	Supervisor	
Job duties	Dates: From	To	
		\$	
Reason for Leaving	Salary		

## REFERENCES

Please list three professional references not related to you, two of whom you have worked with professionally or educationally, that you have known at least one year.

1.

Name	Title/Relationship	Telephone Number
Company	E-mail	

2.

Name	Title/Relationship	Telephone Number
Company	E-mail	

3.

Name	Title/Relationship	Telephone Number
Company	E-mail	

## CONSENT

With the submission of this application I certify that all statements are true and correct to the best of my knowledge and belief. Any misrepresentations or omissions on this application may be cause for rejection of the application or dismissal after employment.

I authorize investigation of all statements contained in this application and authorize the Township to perform a background check as may be necessary in arriving at an employment decision.

I understand that all employees of the Township are employed at-will, which means that either the Township or the employee may terminate the employment relationship at any time, with or without notice and for any and no reason. Employees covered by a collective bargaining agreement will be governed by the terms and conditions of the contract. No employee or representative of the Township has authority to enter into any agreement specifying duration of employment or abrogating an employee's at-will employment status. I understand that this application is not intended to confer any contractual right or obligation to any party and that the Township reserves the right to change any practice, policy or procedure with or without notice, at its sole discretion.

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Applicant's Signature Date

## Digital Signature Instructions

Require Adobe Acrobat Reader DC – Download Link <https://www.adobe.com/acrobat/online/sign-pdf.html>

Follow the instructions below to sign the document electronically.

I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.

Name:  Signature:

Date:

Witness:  Signature:

Date:

### If the employee is a minor:

Parent/Legal Guardian Name:  Signature:

Date:

Select "Create a new digital ID" and Continue

### Configure a Digital ID for signing

A Digital ID is required to create a digital signature. The most secure Digital IDs are issued by trusted Certificate authorities and are based on secure devices like smart card or token. Some are based on files.

You can also create a new Digital ID, but they provide a low level of identity assurance.

Select the type of Digital ID:

- Use a Signature Creation Device  
Configure a smart card or token connected to your computer
- Use a Digital ID from a file  
Import an existing Digital ID that you have obtained as a file
- Create a new Digital ID  
Create your self-signed Digital ID

Select either option to protect your self-signed digital ID.

The first option will require your password every time you sign a document with your digital signature. The second option saves the digital signature to your computer.

For this example, the first option to “Save to File” was selected and continue.

### Select the destination of the new Digital ID ✕

Digital IDs are typically issued by trusted providers that assure the validity of the identity. Self-signed Digital ID may not provide the same level of assurance and may not be accepted in some use cases.

Consult with your recipients if this is an acceptable form of authentication.

- Save to File**  
Save the Digital ID to a file in your computer
- Save to Windows Certificate Store**  
Save the Digital ID to Windows Certificate Store to be shared with other applications

? Back Continue

Complete the required fields.

### Create a self-signed Digital ID ✕

Enter the identity information to be used for creating the self-signed Digital ID.

Digital IDs that are self-signed by individuals do not provide the assurance that the identity information is valid. For this reason they may not be accepted in some use cases.

Name	<input type="text" value="Enter Name..."/>
Organizational Unit	<input type="text" value="Enter Organizational Unit..."/>
Organization Name	<input type="text" value="Enter Organization Name..."/>
Email Address	<input type="text" value="Enter Email..."/>
Country/Region	<input type="text" value="US - UNITED STATES"/>
Key Algorithm	<input type="text" value="2048-bit RSA"/>
Use Digital ID for	<input type="text" value="Digital Signatures"/>

Email address is not valid

? Back Continue

You will be prompted to create a strong password for the signature and click on Save

### Save the self-signed Digital ID to a file ✕

Add a password to protect the private key of the Digital ID. You will need this password again to use the Digital ID for signing.

Save the Digital ID file in a known location so that you can copy or backup it.

Your Digital ID will be saved at the following location :

C:\Users\zhou\AppData\Roaming\Adobe\Acrobat\DC\ Browse

**Apply a password to protect the Digital ID:**

.....

**Confirm the password:**

.....

? Back Save

For this example, the second option of “Save to Windows Certificate Store” was selected.

### Select the destination of the new Digital ID ✕

Digital IDs are typically issued by trusted providers that assure the validity of the identity. Self-signed Digital ID may not provide the same level of assurance and may not be accepted in some use cases.

Consult with your recipients if this is an acceptable form of authentication.

**Save to File**  
Save the Digital ID to a file in your computer

**Save to Windows Certificate Store**  
Save the Digital ID to Windows Certificate Store to be shared with other applications

? Back Continue

Complete the required fields and click Save

## Create a self-signed Digital ID



Enter the identity information to be used for creating the self-signed Digital ID.

Digital IDs that are self-signed by individuals do not provide the assurance that the identity information is valid. For this reason they may not be accepted in some use cases.

Name	<input type="text" value="Enter Name..."/>
Organizational Unit	<input type="text" value="Enter Organizational Unit..."/>
Organization Name	<input type="text" value="Enter Organization Name..."/>
Email Address	<input type="text" value="Enter Email..."/>
Country/Region	<input type="text" value="US - UNITED STATES"/>
Key Algorithm	<input type="text" value="2048-bit RSA"/>
Use Digital ID for	<input type="text" value="Digital Signatures"/>



Back

Save

## Signing with a digital signature

Click on the signature box to digitally sign your document.

**I hereby swear/affirm that the information as set forth above is true and correct. I understand that false swearing is a misdemeanor pursuant to Section 4903 of the Crimes Code.**

Name:

Signature:

Date:

Witness:

Signature:

Date:

**If the employee is a minor:**

Parent/Legal Guardian Name:

Signature:

Date:



If you create your digital signature with a password (Digital ID file), you will be prompted for a password before you can sign the document.

**Sign with a Digital ID** [Close]

Choose the Digital ID that you want to use for signing: [Refresh]

- [Icon] [Redacted] (Windows Digital ID) [View Details]  
Issued by: [Redacted] Expires: 2025.04.07
- [Icon] [Redacted] (Digital ID file) [View Details]  
Issued by: [Redacted] Expires: 2025.04.07

[Help] [Configure New Digital ID] [Cancel] [Continue]

**Sign as "[Redacted]"** [Close]

Appearance: Standard Text [Create]

[Redacted] Digitally signed by [Redacted]  
Date: 2020.04.07 12:11:59 -04'00'

[View Certificate Details]

Review document content that may affect signing [Review]



[Password Input Field] [Back] [Sign]

The document will then require you to save the document to complete the signature process.

Signature using Windows Digital ID will just be signed after clicking on the digital signature, continue sign and saving the document.

### Sign with a Digital ID ✕

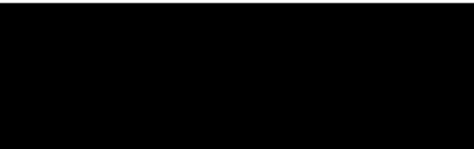

Choose the Digital ID that you want to use for signing: Refresh

-  [Redacted] (Digital ID file) View Details  
Issued by: [Redacted] Expires: 2025.04.07
-  [Redacted] (Windows Digital ID) View Details  
Issued by: [Redacted] Expires: 2025.04.07

? Configure New Digital ID Cancel Continue

### Sign as "[Redacted]" ✕

Appearance Standard Text ▼ Create

  
  
**Digitally signed by [Redacted]**  
**Date: 2020.04.07 12:14:35 -04'00'**

Lock document after signing View Certificate Details

Review document content that may affect signing Review

Back Sign