

Application For Employment

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
How Did You Learn About Us?	
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative
	<input type="checkbox"/> Walk-In
	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip Code
Telephone Number(s)		

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes No

Have you ever filed an application with us before? Yes No

If Yes, give date _____

Have you ever been employed with us before? Yes No

If Yes, give date _____

Are you currently employed? Yes No

May we contact your present employer? Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last 7 years? Yes No

Conviction will not necessarily disqualify an applicant from employment.

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Indicate any foreign languages you can speak, read and / or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

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		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					
4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for Leaving					

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:

Additional Information

Other Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Specialized Skills

Check Skills/Equipment Operated

<input type="checkbox"/> CRT	<input type="checkbox"/> Fax	Production/Mobile Machinery (list):	Other (list):
<input type="checkbox"/> PC	<input type="checkbox"/> Lotus 1-2-3	_____	_____
<input type="checkbox"/> Calculator	<input type="checkbox"/> PBX System	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Wordperfect	_____	_____
		_____	_____

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you have applied? A description of the activities involved in such a job or occupation is attached.

YES NO

References

1.	_____ ()
	(Name) Phone #

	(Address)
2.	_____ ()
	(Name) Phone #

	(Address)
3.	_____ ()
	(Name) Phone #

	(Address)

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

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 45 days. 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 this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge 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 this organization.

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

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

INTERVIEWER DATE

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/
Salary _____ Department _____

By _____

NAME AND TITLE

DATE

NOTES _____

This Application For Employment is sold for general use throughout the United States. Amsterdam Printing and Litho Corp. assumes no responsibility for the use of said form or any questions which, when asked by the employer of the job applicant, may violate State and/or Federal Law.

BRIGHTON TOWNSHIP MUNICIPAL AUTHORITY

EMPLOYEE NAME:

JOB CLASSIFICATION: Meter Reader

JOB RESPONSIBILITIES/DUTIES:

1. Must be able to operate vehicles and tools pertinent to the meter reader position.
2. Read water meters and record data. Report non-typical findings to office staff.
3. Performs related work as required.

SKILLS

1. Mathematics: Ability to add, subtract, multiply and divide.
2. Writing: Ability to record water meter data.
3. Speaking: Ability to communicate clearly with Operations Supervisor, co-workers and public.

SUPERVISION:

Employee is supervised by the Operations Supervisor and works under his direction. Employee does not supervise other employees.

PHYSICAL DEMAND/WORK ENVIRONMENT:

Employee is subject to a flexible work schedule often including weekends. Work must be completed within specific time constraints.

Work is performed out-of-doors where employee is subject to inclement weather conditions including rain, snow or high temperatures. Job responsibilities require extensive walking, including upon uneven ground and untreated surfaces, or shrubs, weeds or other landscaping to access meter reading locations.

Meter reading is upon private properties where employee may encounter home occupants, pets, including dogs. Employee must be able to engage with the public in a courteous and professional manner.

EDUCATION/EXPERIENCE:

High School diploma or equivalent.

Valid Pennsylvania Driver's License.

MANAGEMENT RIGHTS:

The Board of Directors specifically reserve management rights which include, without limitation, the Authority's rights to: direct, plan and control operations; determine and re-determine job content, job descriptions, and job standards; to be the sole judge of the quality and quantity of work required; determine and re-determine the work to be performed, and by whom; determine and re-determine the method, hours, and manner of performing work; hire, promote, demote, lay off, and recall employees; discipline, suspend, or discharge employees for just cause; assign or transfer employees to needed tasks; adopt and modify from time to time, and enforce, as necessary, reasonable Authority policies, rules, and regulations to maintain order, safety and/or efficiency.

AUTHORITY APPROVAL:

Signature

Date

EMPLOYEE ACKNOWLEDGMENT:

Signature

Date