

PERSONAL REFERENCES- Not relatives or former employers. Persons you have known at least one year.

Name	Address	Phone Number

PERSONAL DATA	YES	NO
1. Are you prevented from lawfully becoming employed in this county because of VISA or immigrant status?	1.	
2. Are you a veteran of the armed forces?	2.	
3. Have you ever worked for Hampton Township under another name? If yes, list name	3.	
4. Are you 18 years of age or older?	4.	
5. Do you have any relatives, other than a spouse, employed by Hampton Township? If yes, who?	5.	
6. Have you ever been convicted of a felony? • If yes, list felony	6.	
7. Have you ever been fired from a job?	7.	
8. Will you submit to pre-employment drug screening?	8.	

• Felony convictions are not an automatic disqualifying element in the hiring process.

Hampton Township is an equal opportunity employer. Employment selection and all other employment decisions are made without regard to race, color, religion, national origin, sex, disability, or handicap, age, height, weight, veteran status, marital status, employment status or any other reason prohibited by law.

CERTIFICATIONS

READ THOROUGHLY BEFORE SIGNING. IF YOU HAVE ANY QUESTIONS, PLEASE ASK BEFORE SIGNING.

I agree that any action or lawsuit against the employer, arising out of my employment or termination of employment, including, but not limited to, state or federal civil rights statute must be filed within 180 days of the event giving rise to the claim or be forever barred. I waive any limitation periods to the contrary.

I certify that the information contained in this application, and future information in support of my application, is correct and understand that falsification of this information is grounds for dismissal. I authorize the references I have provided and my former and/or current employer(s) to give you any and all information concerning my previous or current employment and any pertinent information that they may have, personal or otherwise, and release all parties from all liability for any damages, causes of actions, including, but not limited to, slander and libel, that may result from the furnishing of information. In consideration of my employment, I agree to conform to the rules and regulations of the employer and agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, and my employment relationship is at will. I understand that no manager or representative of the employer has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing. I understand that any employment offer is conditional upon the results of the drug-screening test and the post-offer medical examination, if any. I authorize the employer to make a check of my records of driving violations and criminal history, if any. I have read, understand, and agree to the terms contained in the certifications listed herein.

_____	_____
Date	Signature of Applicant
_____	_____
	Print Name