NATIONAL PIKE WATER AUTHORITY

PO BOX 10, MARKLEYSBURG, PA 15459 * (P)724-329-0649 * (F)724-329-2418

APPLICATION FOR EMPLOYMENT

The National Pike Water Authority is an Equal Opportunity employer. Various federal, state and local laws prohibit discrimination based on race, color, religion, sex, age, national origin, disability or veteran's status. It is the policy of the National Pike Water Authority to comply fully with applicable law, and information requested on this application will not be used for any purpose prohibited by law.

(PLEASE PRINT)

			Data of Applicat	tion.		
Desition Andre 15			Date of Applicat			
Position Applied For						
Referral Source:			Employment A			
NAME:						
ADDRESS:						
PHONE: ()						
EMAIL ADDRESS:						
Are you a citizen of tl						NO
Are you available for	work?			Full-time		Part-time
Are you on layoff and	subject to recall	•••••			_YES	NO
Do you have any rela	tives working for t	he National Pike	Water Authority?		_YES	NO
If YES, List Na	me(s):					
Have you ever been o					_YES _	NO
-						
Are you a veteran of	the U.S. Military Se	ervice?			_YES _	NO
Do you have a curren					YES	NO

EDUCATION

Job Title

Work Performed

Dates Employed:

Reason for Leaving:

Elementary School High School College Trade, Business or Corresponding School Graduate/ Professional Describe any specialized training, skills or activities you have which are pertinent to this position: MPLOYMENT st each job held. Start with your current or most recent job including military service. If you have no clude any volunteer activities, but exclude groups that indicate race, color, religion, sex or national tembers. If you need additional space, please attach a separate sheet of paper.		Name and Location of School	Years Attended	Date Graduated	Diploma or Degree Earned	Course of Study
College Trade, Business or Corresponding School Graduate/ Professional escribe any specialized training, skills or activities you have which are pertinent to this position: MPLOYMENT st each job held. Start with your current or most recent job including military service. If you have no clude any volunteer activities, but exclude groups that indicate race, color, religion, sex or national embers. If you need additional space, please attach a separate sheet of paper.	Elementary School		2.0			
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Corresponding School Graduate/ Professional MPLOYMENT t each job held. Start with your current or most recent job including military service. If you have no clude any volunteer activities, but exclude groups that indicate race, color, religion, sex or national embers. If you need additional space, please attach a separate sheet of paper.	College					
Professional Describe any specialized training, skills or activities you have which are pertinent to this position: MPLOYMENT It each job held. Start with your current or most recent job including military service. If you have not be any volunteer activities, but exclude groups that indicate race, color, religion, sex or national embers. If you need additional space, please attach a separate sheet of paper.	Corresponding					
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REFERENCES	
List names, addresses and phone numbers of three references not related	I to you.
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2	
3	
STATEMENT	
I certify that the information provided herein is true and complete to the k	pest of my knowledge.
I authorize investigation by the National Pike Water Authority of all informal Application for Employment as may be necessary in arriving at a decision release the National Pike Water Authority, its agents and representative investigation and all previous employers, companies/corporations, cooperating with such investigation. I acknowledge and agree that by companies is no guarantee I will be interviewed for or offered any position.	mation and references contained in this n concerning my employment. I hereby ves, from any and all liability for such
If I am employed, I further acknowledge and agree that any false or representations given in my application or interview(s) will result in my dethat I am required to faithfully abide by all policies, procedures, rules and Authority.	ischarge at any time. Lalso understand
SIGNATURE OF APPLICANT:	DATE: