

## TOWNSHIP OF ABINGTON

1176 Old York Road Abington, Pennsylvania 19001 Tel # 267-536-1000 □ Fax # 215-884-8271

## **Application for Employment**

PERSONAL INFO	ORMATION					Date:	
Name				e-mail add	dress		
Last		First	Middle				
<b>Present Address</b>							
	Street	<del></del>			City/State/Zip		
Permanent Addre	ess						
	Street				City/State/Zip		
Telephone Number	er(s)						
List any relatives	working for us:						
How did you learn	n about Abingtor	Townsh	nip's employme	nt opportun	ity?		
Newspaper Adverti	isement	Refe	erred by:				
Other							
EMPLOYMENT	DESIRED						
Position							
Date you can start?		Sala	Salary Requirements?				
Are you employed	l now?	Ma	y we inquire of	your curre	nt employ	er?	
Have you applied	for a job at Abir	ngton To	wnship before?	ı	If so	, when?	
EDUCATION	Name of Schoo	1	Location of Sch		# of Yrs. Attended	Did you Graduate?	Major Course of Study
High School							
College							
Trade/Correspondence							

Please describe additional skills, training, or abilities you would like to have us consider in evaluating your qualifications:

If Yes, list the software that you have experience with:  FORMER EMPLOYERS: (List below last four employed Company/Firm:  Address:  To:  Rate  Supervisor:	ers, starting (Mo./Yr.) (Mo./Yr.) of Pay	
Company/Firm:  Address:  To:  Rate  Start	(Mo./Yr.) (Mo./Yr.)	
Company/Firm:  Address:  To:  Rate  Start	(Mo./Yr.) (Mo./Yr.)	
Address: To:  Rate  Start	(Mo./Yr.)	
Rate Start		Job Title:
Start	of Pay	Duties:
Supervisor:	<u>Finish</u>	
		Reason for Leaving:
Company/Firm: From:	(Mo./Yr.)	Job Title:
Address: To:	(Mo./Yr.)	Duties:
Rate	of Pay	
Start	<u>Finish</u>	
Supervisor:		Reason for Leaving:
Company/Firm: From:	(Mo./Yr.)	Job Title:
Address: To:	(Mo./Yr.)	Duties:
Rate	of Pay	
Start	<u>Finish</u>	
Supervisor:		Reason for Leaving:
Company/Firm: From:	(Mo./Yr.)	Job Title:
Address: To:	(Mo./Yr.)	Duties:
Rate	of Pay	
Start		
Supervisor:	<u>Finish</u>	

Years

REFERENCES (Give the names of three persons not related to you whom you have known for at least one year)

N	Name	Address	Occupation	Years Acquainted
1.				
2.				
3.				
1.	-	commodation, to perform all of the No	essential functions of the job	for which you
2.	•	nmodation, to perform all of the esses	ential functions of the job for	which you are
3.	If yes, please describe the	e accommodation(s) that you need.		
4.		of the job for which you are applyin? If so, please describe.		
<b>U.S.</b> I	MILITARY SERVICE (OI	PTIONAL)		
Dates	s of Service: From	ToBranch		
Rank	and Principal Duties:			
Туре	of Discharge:			
ELIG	GIBILITY TO WORK IN T	THE UNITED STATES		
		all persons hired will be required t te the required employment eligibil		
[ und	erstand the requirements a	as listed above. Yes No	0	

I hereby give the TOWNSHIP OF ABINGTON the right to make a thorough investigation into my previous employment, education and references; and I release from all liability all persons, companies, and corporations supplying such information. I release, indemnify, and hold harmless the TOWNSHIP OF ABINGTON from and against any and all liability which might result from making such an investigation.

I understand that any false answer, statement, or representation made by me in this application shall constitute sufficient cause for discharge. I also understand that nothing contained in this employment application or granting of an interview is intended to create an employment contract between the TOWNSHIP OF ABINGTON and me either for employment or for the granting of benefits. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the TOWNSHIP OF ABINGTON unless made in writing. If an employment relationship is established, I understand and agree that it is not for a definite period of time and that I have the right to terminate my employment at any time and that the TOWNSHIP OF ABINGTON retains a similar right.

I understand that, if accepted for employment, it is necessary to abide by the rules and policies of the TOWNSHIP OF ABINGTON and that I will be on probation before being considered a regular employee.

Signature:

Date:

	DO NOT WRITE B	BELOW THIS LINE	
Interviewer:	Date:	Interviewer:	Date:
Remarks:		Remarks:	
Job Title:		Department:	
Starting Date:		Starting Rate of Pay:	

### TOWNSHIP OF ABINGTON Substance Abuse Policy

This is to reiterate and formally state Abington Township's policy regarding the work-related effects of drug and alcohol use and the unlawful possession of controlled substances on township premises. Our policy is as follows:

<Employees are expected and required to report to work on time in appropriate mental and physical condition for work. It is our intent and obligation to provide an alcohol-free and drug-free, healthful, safe and secure work environment.

<The consumption and possession of alcohol and/or the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance on township premises or while conducting township business off township premises is absolutely prohibited. Violation of this policy will result in disciplinary action, up to and including termination, and may have legal consequences.</p>

<The township recognizes alcohol and drug dependency as an illness and a major health problem. The township also recognizes alcohol and drug abuse as a potential health, safety, and security problem. Employees needing help in dealing with such problems are encouraged to use our employee assistance program and health insurance plans, as appropriate. Conscientious efforts to seek such help will not jeopardize any employee's job and will not be noted in any personnel record.</p>

<Abington Township employees who are required to hold a Commercial Driver's License (CDL) to perform their duties are to be tested for controlled substance and alcohol effective March 1, 1995.</p>

<Members of the Abington Township Police Association, Abington Township Police Lieutenants, and Abington Township Per Diem Union are required to participate in a random drug and alcohol testing program, as described in their contract.</p>

<Abington Township employees who are not covered under a collective bargaining agreement and work in safety-sensitive functions are required to participate in a random drug and alcohol testing program effective March 1, 1995.</p>

<A pre-employment drug test and alcohol test will be conducted when an individual is first employed and when a current employee is transferred from a non-covered position to a covered position. Seasonal employees in non-covered positions will be exempt from testing.

<Employees must, as a condition of employment, abide by the terms of the above policy and report any conviction under a criminal drug statute for violations occurring on or off township premises while conducting township business. A report of a conviction must be made within five (5) days after the conviction. (This requirement is mandated by the Drug-Free Workplace Act of 1988.)

# ABINGTON TOWNSHIP NOTICE TO APPLICANTS AND APPLICATIONS FOR EMPLOYMENT

We are pleased that you have chosen to apply for a job with our township. Abington Township offers challenging work opportunities.

Abington Township is an equal employment opportunity employer. It is the policy of this township to consider all applicants for employment based on their qualifications in light of job vacancies. Abington Township fully complies with all applicable laws which prohibit discrimination on the basis of real or perceived color, religious belief, sexual orientation, gender identity, gender expression, age, race, national origin, non-job related disability, use of a service animal, or other prohibited criteria as these terms are used under applicable law.

You will be expected to successfully pass a substance abuse test as a part of the application process. For the safety of our current and future employees, we intend for this to be a drug-free workplace.

Abington Township will accept applications only when there is an open position available. To be sure that your application receives full consideration, you must fill it in completely and accurately. Unless otherwise specified, applications are considered active for 30 days from the date they are filed. After 30 days, the applications are retired to an inactive status file for a period of time as required by law. If you have not been hired within 30 days of the date you file your application and you wish to be considered for jobs that become available after that date when a position becomes available, you must return to the township and fill out a new application or update your old application.

Richard Manfredi

	Township Manager
Date:	
Name of Applicant: (Please print)	
Signature of Applicant:	

### Nondiscrimination/Sexual Harassment Policy Statement Of Abington Township

It has been and will continue to be the policy of Abington Township that it shall be an equal opportunity employer. To assure full implementation of the policy, Abington Township shall act affirmatively to assure it will:

- 1. Recruit, hire and promote for all job classifications without regard to actual or perceived race, creed, color, national origin, age, religion, ancestry, union membership, disability (in accordance with the Americans With Disabilities Act of 1990), use of a service animal, military veteran status, lifestyle, sexual orientation, gender identity, or gender expression.
- 2. Base decisions on employment solely upon an individual's qualifications and interest in the position being filled.
- 3. Make promotion or hiring decisions only on the individual's qualifications as related to the requirements of the position for which the employee is being considered without regard to real or perceived, race, creed, color, national origin, age, religion, ancestry, union membership, disability, use of a service animal, military veteran status, lifestyle, sexual orientation, gender identity, or gender expression.
- 4. Ensure that all other personnel actions such as compensation, benefits, transfers, layoffs, return from layoffs, company-sponsored training, education, tuition, assistance, social and recreational programs, will be administered without regard to real or perceived race, creed, color, national origin, age, religion, ancestry, union membership, disability, use of a service animal, military veteran status, lifestyle, sexual orientation, gender identity or gender expression.
- 5. Ensure that sexual harassment in the workplace is prohibited. Sexual harassment is any unwelcome sexual advance, request for sexual favors, and any other verbal or physical conduct of a sexual nature when submission to such conduct is made either explicitly or implicitly a term or condition of employment; submission to or rejection of such conduct is used as the basis for employment decisions affecting the individual; or when such conduct has the effect of unreasonably interfering with the individual's work performance or creating an offensive working environment.

Examples of acts of sexual harassment which shall not be tolerated include but are not limited to:

- written suggestive or obscene letters, poems, notes, or invitations;
- verbal derogatory comments, epithets, slurs, or jokes;

- physical impeding or blocking movement; touching; patting; pinching; or other unnecessary physical interference with normal work;
- visual sexually oriented gestures, display of sexually suggestive or derogatory objects, pictures, cartoons, posters, or drawings;
- other threats or insinuations that lack of sexual favors will result in reprisal, punitive actions, change of assignment, or a poor performance evaluation; withholding support for appointment, promotion, transfer.

In keeping with the above policy, employees who believe they have been or are being discriminated against or sexually harassed should contact your Supervisor or Department Head, the Human Resources Coordinator, or any Township Department Head at 267-536-1000 between the hours of 7:30 to 5:00 p.m.

Retaliation against persons who have filed charges, testified, assisted, and participated in any way in any proceeding, investigation, or hearing under the provisions of the Age Discrimination Law, or under Title VII of the Civil Rights Act, Americans With Disabilities Act of 1990, or the Township of Abington's Ordinances 2029 and 2074, is expressly prohibited and unlawful.

At any time, the employee may file a formal complaint with one of the following agencies within the respective time frames:

**Appellate Authorities** 

### **APPELLATE AUTHORITIES**

Pennsylvania Human Relations Commission	<b>Equal Employment Opportunity Commission</b>
Philadelphia Regional Office	Philadelphia District Office
110 North 8 <sup>th</sup> Street, Suite 501	801 Market Street, Suite 1300
Philadelphia, PA 19107	Philadelphia, PA 19106
215-560-2496	1-800-669-4000
TDD 215-560-3599	TDD 1-800-669-6820
Time Frame:	Time Frame:
180 days from date of alleged occurrence	300 days from date of alleged occurrence

The employee may also contact the Abington Township Human Relations Commission (AHRC) to file a complaint. The AHRC can provide mediation or will advise the employee to contact the PHRC at;

Abington Township Human Relations Commission abingtontownshiphrc@gmail.com 267-518-8049 http://abington.org/government/human-relations-commission

# GRIEVANCE PROCEDURE FOR HANDLING COMPLAINTS OF ALLEGED EMPLOYMENT DISCRIMINATION

Any employee who feels that he or she is being discriminated against on the basis of race, color, religious creed, ancestry, national origin, age, disability, use of a service animal, sexual orientation, gender identity, gender expression or union membership may file a complaint either in writing or verbally to their Supervisor within ten (10) days of the alleged occurrence.

The Supervisor will meet with the employee within five (5) days of receipt of a complaint in an attempt to resolve the discrimination complaint to the satisfaction of both parties.

If the complaint is not resolved to the petitioner's satisfaction, the employee shall present said complaint to the Township Manager for consideration within twenty (20) days from the date the complaint was originally filed with the Department Head. Within seven (7) days thereafter, a written decision shall be rendered by the Township Manager.

At any time, the employee may file a formal complaint with one of the following agencies within the respective time frames.

#### **APPELLATE AUTHORITIES**

**Equal Employment Opportunity Commission** 

**Pennsylvania Human Relations Commission** 

Philadelphia District Office 801 Market Street, Suite 1300 Philadelphia, PA 19106
,
1-800-669-4000
TDD 1-800-669-6820
Time Frame:
300 days from date of alleged occurrence
ownship Human Relations Commission (AHRC) to iation or will advise the employee to contact the
ssion
ns-commission
Date:
j