



# Township of Spring

2850 Windmill Road  
Sinking Spring, PA 19608

[www.springtwpberks.org](http://www.springtwpberks.org)  
610.678.5399

Educational Background				
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Name of School	City & State	Major course of study	Circle last year completed	Degree or Diploma
High School or Prep School			9 10 11 12	
College or Technical School			1 2 3 4	
College (Advanced Degree)			1 2 3 4	

Please list relevant activities in which you have participated while in high school or college:

  
  
  

List any other particular skills, and/or coursework which you feel especially qualify you for the position you seek with this organization. (Include, if applicable, specialized certifications or licenses, language fluency, related coursework and/or workshops and seminars you have attended.):

  
  
  

**Please check any of the following items for which you have experience and/or you feel capable of teaching (list any additional items in the blank spaces):**

Arts & Crafts		Baseball		Theater	
Puppetry		Softball			
Table Games		Song Games/Singing			
Modern Dancing		Kickball			
Story Telling Group		Soccer			
Organized Games		Basketball			
Nature Study		Dodgeball			
Tennis		Volleyball			

Employment History	List each position held. Start with your present or last job. <b>DO NOT WRITE "SEE RESUME"</b>
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Company Name			
Address - Street	City	State	Zip Code
Employed From (Mo./Yr.)	Position Title	Supervisor Name, Title (plus contact information)	
Employed To (Mo./Yr.)	Description of duties, responsibilities and/or significant accomplishments		
Salary - Starting		Salary - Ending	
Hours Worked Weekly	Reason For Leaving		

Company Name
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Address - Street		City		State		Zip Code	
Employed From (Mo./Yr.)		Position Title		Supervisor Name, Title (plus contact information)			
Employed To (Mo.-Yr.)		Description of duties, responsibilities, and/or significant accomplishments					
Salary - Starting		Salary - Ending					
Hours Worked Weekly		Reason For Leaving					
Company Name							
Address - Street		City		State		Zip Code	
Employed From (Mo./Yr.)		Position Title		Supervisor Name, Title (plus contact information)			
Employed To (Mo.-Yr.)		Description of duties, responsibilities, and/or significant accomplishments					
Salary - Starting		Salary - Ending					
Hours Worked Weekly		Reason For Leaving					

For seasonal positions, a minimum of 2 positive references from individuals other than friends or family members must be obtained. If your work history above is insufficient to provide 2 reference contacts, please provide additional references below (i.e. former or current teachers, professors, directors from organizations for which you have volunteered, etc). **Note: For full-time and/or professional level positions, work related references must be obtained and provided above in the employment history section.**

Name of Reference	Position/Title & Where Employed	Relationship to You (i.e. former teacher, etc.)	Phone Number

**Please indicate any current certifications (i.e. teaching certification, CPR, First Aid) and/or background clearances you have:**

Clearance/Certification	Date Obtained	Expiration Date (if any)		Other (Please List)	Date Obtained	Expiration Date (if any)
Child Abuse Clearance						
FBI Background Check						
Criminal History (PA State)						

I certify that the information contained on this application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal if employed by the Township of Spring. I further understand that this application is not intended to be a contract of employment, nor does this application obligate the Township of Spring in any way if it decides to employ me.

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I authorize the employers/supervisors listed above to give the Township of Spring any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing said information to the Township of Spring.

Please identify any employers/supervisors you do NOT wish the Township of Spring to contact and reason not to contact:

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The Township of Spring is hereby authorized to investigate my past employment, professional and other licensure and/or certifications, criminal record, child abuse record, driving record and military record through its Human Resource Department or its designee. For the purpose of verifying my qualifications for employment, the Township of Spring is authorized to obtain educational records and information relating to courses taken, my performance in those courses, degrees and awards received by me as well as disciplinary actions taken against me while enrolled. In the event an investigation reveals convictions or security related issues, I understand my employment, or consideration for employment, could be terminated immediately.

I understand that passing a drug test is a condition of employment for full-time and part-time regular (non-seasonal) positions and, if an employment offer is extended, depending upon the requirements of the position for which I am being hired, I may be required to take, pass, and complete job-related physical and agility examinations along with psychological and polygraph examinations before commencing my duties.

No representative of the Township of Spring has any authorization to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing.

If employed by the Township of Spring, I agree to conform to its policies and procedures. Unless otherwise governed by a collective bargaining agreement, employment at the Township of Spring is at will; i.e., either you or the Township of Spring may discontinue employment at any time, for any or no reason, with or without notice.

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Applicant's Signature

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Date

## RETURN COMPLETED APPLICATION TO:

Township of Spring  
Attn: Parks and Recreation Department  
2850 Windmill Road  
Sinking Spring, PA 19608

Or email to: [ljack@springtwpberks.org](mailto:ljack@springtwpberks.org)