BOROUGH OF LITTLESTOWN

NOW HIRING – OFFICE ADMINISTRATOR

The Borough of Littlestown is seeking a highly organized, dependable, and detail-oriented professional to serve as its full-time **Office Administrator**.

This position provides administrative and operational support to the Borough Office. The successful candidate must demonstrate strong organizational, communication, customer service, and computer skills while maintaining professionalism and confidentiality.

Preferred Qualifications: Previous experience in office administration, municipal government, or a related field preferred. Strong computer skills, including Microsoft Word, Excel, Outlook, and office management software. Excellent written and verbal communication skills and experience with financial recordkeeping, accounts payable, and municipal billing preferred.

The Borough offers competitive compensation based on qualifications and experience, along with a comprehensive employee benefits package.

How to Apply:

Interested applicants should submit a completed employment application and/or résumé to:

Borough of Littlestown
Attn: Borough Manager
41 South Columbus Avenue
Littlestown, PA 17340
manager@littlestownboro.org
Application Deadline: Friday, December 11, 2026, by Noon

The Borough of Littlestown is an Equal Opportunity Employer.

BOROUGH OF LITTLESTOWN
APPLICATION FOR EMPLOYMENT

41 South Columbus Ave
Littlestown, PA 17340
Phone: (717) 359-5101
Website: littlestownboro.org

OFFICE ADMINISTRATOR
An Equal Opportunity Employer

(Please print or type)

Last Name: _____ **First Name:** _____ **Middle Name:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Home Phone: _____ **Cell Phone:** _____ **Email Address:** _____

Date Available to Start: _____ **Are you over the age of 18?** ☐ **Yes** ☐ **No** **If No, state your age** _____

Can you provide required proof of your elgibility to work? ☐ **Yes** ☐ **No**

Can you perform the essential duties of the job for which you are applying for with or without accomodations? ☐ **Yes** ☐ **No**

Have you ever been convicted of a crime other than a minor traffic offense? ☐ **Yes** ☐ **No**

If yes, state the nature of the offense, date, city and state below:

Nature of offense: _____ **Date:** _____ **City:** _____ **State:** ____

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Disclosure of a criminal record will not necessarily disqualify you for employment consideration. Each offense will be evaluated on its own merit with consideration for job duties which you will be performing.

During the past ten (10) years, have you ever been involved in any work-related incident(s) which caused damage to facilities, equipment, property, or other persons? ☐ **Yes** ☐ **No**

Do you have the legal right to work in the United States? ☐ **Yes** ☐ **No** **If No, enter reason below:**

_____

_____

Record of Education

High School Attended: _____ **Location:** _____

Course of Study: _____ **From Date:** _____ **To Date:** _____

Degree/Certification Received: _____

Record of Education

College/Tech: _____ **Address:** _____

Course of Study: _____ **From Date:** _____ **To Date:** _____

Degree/Certification Received: _____

College/Tech: _____ **Address:** _____

Course of Study: _____ **From Date:** _____ **ToDate:** _____

Degree/Certification Received: _____

Graduate School: _____

Other School/Training: _____

Record of Previous Employment

Start with your most recent job and list employment history for the past five(5) years.

Does your present employer know you are seeking employment elsewhere? ☐ **Yes** ☐ **No**

Employer Name: _____ **Position Held:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Supervisor: _____ **Phone:** _____ **From Date:** _____ **To Date:** _____

Nature of Work: _____

_____

Starting Salary: _____ **Ending Salary:** _____ **Reason for Leaving:** _____

Record of Previous Employment

Employer Name: _____ **Position Held:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Supervisor: _____ **Phone:** _____ **From Date:** _____ **To Date:** _____

Nature of Work: _____

_____

Starting Salary: _____ **Ending Salary:** _____ **Reason for Leaving:** _____

Record of Previous Employment

Employer Name: _____ **Position Held:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Supervisor: _____ **Phone:** _____ **From Date:** _____ **To Date:** _____

Nature of Work: _____

_____

Starting Salary: _____ **Ending Salary:** _____ **Reason for Leaving:** _____

Record of Previous Employment

Employer Name: _____ **Position Held:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Supervisor: _____ **Phone:** _____ **From Date:** _____ **To Date:** _____

Nature of Work: _____

_____

Starting Salary: _____ **Ending Salary:** _____ **Reason for Leaving:** _____

Record of Previous Employment

Employer Name: _____ **Position Held:** _____

Street Address: _____ **City:** _____ **State:** ____ **Zip Code:** _____

Supervisor: _____ **Phone:** _____ **From Date:** _____ **To Date:** _____

Nature of Work: _____

_____

Starting Salary: _____ **Ending Salary:** _____ **Reason for Leaving:** _____

Specialized Skills

Give information concerning any vehicle operator's license or any other license you now hold:

Type: _____ **Number:** _____ **State:** ____ **Expiration Date:** _____

Type: _____ **Number:** _____ **State:** ____ **Expiration Date:** _____

Type: _____ **Number:** _____ **State:** ____ **Expiration Date:** _____

Check the categories in which you have experience:

- ☐ **Typing ____ wpm**
- ☐ **10-Key Calculator**
- ☐ **Multi-Line Telephone**
- ☐ **Book Keeping**
- ☐ **Backhoe**
- ☐ **Computer Spreadsheets/Programs**
  - **Type:** _____
  - **Type:** _____
  - **Type:** _____
- ☐ **Sewer/Water Line Repair**
- ☐ **Equipment/Vehicle Repair/Maintenance**
- ☐ **Operation of Dump Truck**
- ☐ **Water Meter Reading/Repair**
- ☐ **Snow Removal**
- ☐ **Computer Operating Systems/Databases**
  - **Type:** _____
  - **Type:** _____
  - **Type:** _____

List of specialized training courses or in the job training you have received

Type of Training	Location of Training

Other Information

Are you willing to work overtime, if necessary? ☐ **Yes** ☐ **No**

Any additional information you feel may be helpful when considering your application:

_____

_____

List three (3) personal references:

Name: _____ **Street Address:** _____ **Phone:** _____

Name: _____ **Street Address:** _____ **Phone:** _____

Name: _____ **Street Address:** _____ **Phone:** _____

List three (3) business references:

Name: _____ **Street Address:** _____ **Phone:** _____

Name: _____ **Street Address:** _____ **Phone:** _____

Name: _____ **Street Address:** _____ **Phone:** _____

APPLICANT'S STATEMENT
AND
WAIVER AND RELEASE FOR BACKGROUND INVESTIGATION

I hereby understand and acknowledge that, unless otherwise defined by applicable law, my 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 the employee at any time with or without cause. I understand, also, that I am required to abide by all rules and regulations of the employer.

The information that I have provided on this application is true and complete to the best of my knowledge. Any misrepresentation or omission of fact in my application, resume, or any other materials, or during any interviews, can be justification for refusal of employment, or, if employed, discharge from employment.

I hereby give the Borough of Littlestown the right to make a thorough investigation into my background, previous employment, education and references in order to ascertain my suitability for service as a Borough employee. I authorize the employer to verify and investigate, at its discretion, the information contained herein; and I authorize my employers to furnish such information, and release them from any damage due to the furnishing of such information. I release from all liability and claims any and all persons, companies, and corporations (public and private) supplying any information whatsoever to representatives of the Borough of Littlestown. This includes, and is not limited to, parties with whom I have entered into a written or oral agreement which contains a confidentiality clause. I release, indemnify and hold harmless the Borough of Littlestown, its officials, officers and employees from and against any and all liability which might result from conducting such an investigation.

I agree that a photocopy of this signed application shall have the effect of an original.

_____
Signature of Applicant

_____
Printed Name of the Applicant

_____
Date

I certify that I have witnessed the signature of the Applicant

_____
Witness Signature and Date