

# APPLICATION FOR EMPLOYMENT

**Instructions:** It is the policy of the Charter Township of Independence to provide equal opportunity with regard to all terms and conditions of employment. The Charter Township of Independence complies with federal and state laws prohibiting discrimination on the basis of race, color, religion, creed, national origin, disability, veteran status, age, or any other protected characteristic.

\_\_\_\_\_  
Date of Application

\_\_\_\_\_  
Name (First, Middle, Last)

(\_\_\_\_\_) \_\_\_\_\_

Phone \_\_\_\_\_

Social Security No. \_\_\_\_\_

\_\_\_\_\_  
Present Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Position applied for

\_\_\_\_\_  
Expected pay

Shift preferred: 1  2  3  Any

Are you at least 18 years old? Yes  No

Work Permit No. (if under 18) \_\_\_\_\_

Would you accept full time work? Yes  No

Would you accept part time work? Yes  No

On what date would you be available to work? \_\_\_\_\_

Have you ever worked under a different name? Yes  No

If so, please provide that name \_\_\_\_\_

Have you ever been employed here before: Yes  No

If yes, what dates? \_\_\_\_\_

List any/all relatives currently employed at the Township:

\_\_\_\_\_

Special training or skills:

Language, machine operation, etc. that would be of benefit in the job for which you are applying

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Complete the following only if the position requires a driver's license.**

Driver's License Number : \_\_\_\_\_

Has your driver's license ever been revoked, suspended or restricted? Yes  No

If yes, for what reason and for how long: \_\_\_\_\_

List any moving violations during the past three years \_\_\_\_\_

\_\_\_\_\_

Are you legally eligible for employment in the United States? Yes  No

If yes, proof is required.

For Office Use Only:

Applicant # \_\_\_\_\_

Employee # \_\_\_\_\_

Hire Date \_\_\_\_\_

Position \_\_\_\_\_

Rate \_\_\_\_\_

Class \_\_\_\_\_

Skill \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Attachments

\_\_\_\_ Resume

\_\_\_\_ Applicant Reference Check

\_\_\_\_ Applicant Interview

\_\_\_\_ Payroll Change Notice

\_\_\_\_ Employee DataCard

## Employment Experience

Place an  by the employer(s) you **do not** want us to contact. List your most recent employer first.

1.  Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_.  
Hourly rate/salary: Starting \_\_\_\_\_ Final \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
  
2.  Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_.  
Hourly rate/salary: Starting \_\_\_\_\_ Final \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
  
3.  Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_.  
Hourly rate/salary: Starting \_\_\_\_\_ Final \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_
  
4.  Employer \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Dates Employed: From \_\_\_\_\_ to \_\_\_\_\_.  
Hourly rate/salary: Starting \_\_\_\_\_ Final \_\_\_\_\_  
Work Performed \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

**Educational Background:**

**Grammar School:**

Name of School \_\_\_\_\_ Location \_\_\_\_\_  
Course of Study \_\_\_\_\_ Did you graduate? \_\_\_\_\_  
Degree or diploma \_\_\_\_\_

**High School:**

Name of School \_\_\_\_\_ Location \_\_\_\_\_  
Course of Study \_\_\_\_\_ Did you graduate? \_\_\_\_\_  
Degree or diploma \_\_\_\_\_

**College:**

Name of School \_\_\_\_\_ Location \_\_\_\_\_  
Course of Study \_\_\_\_\_ Did you graduate? \_\_\_\_\_  
Degree or diploma \_\_\_\_\_

**Graduate School:**

Name of School \_\_\_\_\_ Location \_\_\_\_\_  
Course of Study \_\_\_\_\_ Did you graduate? \_\_\_\_\_  
Degree or diploma \_\_\_\_\_

**Vocational Training - Other:**

Name of School \_\_\_\_\_ Location \_\_\_\_\_  
Course of Study \_\_\_\_\_ Did you graduate? \_\_\_\_\_  
Degree or diploma \_\_\_\_\_

**Continuing Education**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I CERTIFY THAT ALL THE INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE OR MISLEADING INFORMATION, OMISSIONS, OR MISREPRESENTATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED, AND IF I AM EMPLOYED, MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**APPLICANT: DO NOT WRITE ON THIS PAGE. FOR OFFICE USE ONLY.**

**Interview Results:**

Interviewer	Date	Comments

**Test Results:**

Tests Administered	Date	Score	Rating	Comments and Interpretation

**Reference Check:**

Results of Reference Check

Employer 1: \_\_\_\_\_

\_\_\_\_\_

Employer 2: \_\_\_\_\_

\_\_\_\_\_

Employer 3: \_\_\_\_\_

\_\_\_\_\_

Employer 4: \_\_\_\_\_

\_\_\_\_\_