

LAKE TOWNSHIP APPLICATION FOR EMPLOYMENT

DATE: _____

NAME: _____

LAST

FIRST

MIDDLE

ADDRESS: _____

STREET

CITY

ZIP CODE

TELEPHONE HOME _____ ALTERNATE _____

SOCIAL SECURITY NO. _____ ARE YOU OVER 18? Yes ___ No ___

POSITION(S) APPLIED FOR: _____

DO YOU HAVE THE ABILITY TO PERFORM THE JOB-RELATED FUNCTIONS OF THE POSITION FOR WHICH YOU ARE MAKING APPLICATION? Yes ___ No ___

PLEASE DESCRIBE OR DEMONSTRATE HOW, WITH OR WITHOUT REASONABLE ACCOMMODATION, YOU WILL BE ABLE TO PERFORM JOB-RELATED FUNCTIONS.

ARE YOU AVAILABLE FOR: PERMANENT EMPLOYMENT ___ PART-TIME EMPLOYMENT ___
TEMPORARY EMPLOYMENT ___ SEASONAL EMPLOYMENT ___
INTERMITTENT EMPLOYMENT ___

WERE YOU PREVIOUSLY EMPLOYED BY LAKE TOWNSHIP, THE STATE OF OHIO, OR ANY POLITICAL SUBDIVISION? Yes ___ No ___

IF YES, WHEN? _____ WHAT DEPARTMENT? _____

DO YOU HAVE ANY RELATIVES CURRENTLY EMPLOYED BY LAKE TOWNSHIP? _____

IF YES, WHERE? _____

ARE YOU A UNITED STATES CITIZEN? Yes ___ No ___ IF NOT, HAVE YOU LEGALLY DECLARED YOUR INTENTIONS OF BECOMING A U.S. CITIZEN? _____

IF YOUR APPLICATION IS CONSIDERED FAVORABLY, ON WHAT DATE WILL YOU BE AVAILABLE FOR WORK? _____

LIST ANY CERTIFICATES OR LICENSES HELD BY YOU, OR ANY EXPERIENCES OR QUALIFICATIONS WHICH YOU FEEL WOULD ESPECIALLY QUALIFY YOU FOR WORK WITH THE TOWNSHIP.

LIST ANY EQUIPMENT OR MACHINES WHICH YOU KNOW HOW TO OPERATE

SKILLS: TYPING _____ SHORTHAND _____

IN CASE OF EMERGENCY, CALL _____ or _____.

RECORD OF EDUCATION

Circle the highest grade of school completed:
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18

Graduated? Yes___No___
GED? Yes___No___

ELEMENTARY SCHOOL

NAME AND ADDRESS

HIGH SCHOOL

NAME AND ADDRESS

COURSE OF STUDY

COLLEGE

NAME AND ADDRESS

COURSE OF STUDY _____

LIST DEGREE _____

PERSONAL REFERENCES (No former employers or relatives.)

NAME AND OCCUPATION
PHONE NO.

ADDRESS

MILITARY SERVICE RECORD

Served in U.S. Armed Forces? Yes ___ No ___

If yes, what branch? _____

Length of duty - From _____ to _____

Rank at discharge _____

List duties in the service, including special training

Have you taken any training under the G.I. Bill of Rights? _____

If yes, what training did you take? _____

The facts set forth in my application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history.

When making this application for employment I also understand that an investigative report may be made whereby information is obtained through personal interviews with my neighbors, friends, or others with whom I am acquainted. I understand that I have the right to make a written request within a reasonable period of time to receive additional, detailed information about the nature and scope of any such investigative report that is made.

SIGNATURE OF APPLICANT

Applicant: The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex or national origin. The Federal Rehabilitation Act of 1973 prohibits discrimination in employment practices because of handicap status and the terms of the American with Disabilities Act likewise prohibits discrimination in employment or the provision of public services due to protected disability. P.L. 90-202 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age. The laws of the State of Ohio also prohibit some or all of the above types of discrimination, as well as some additional types, such as discrimination against the physically handicapped. Lake Township is committed to non-discrimination in all phases of employment and service provision in conformity with all of the foregoing. A policy or policies in accordance therewith has heretofore been adopted and is on file with the Township Clerk/Administrative Assistant.

Any job offer is subject to a criminal background check and a prior felony conviction may prohibit an applicant from being appointed to certain positions.

PRESENT AND PAST EMPLOYMENT
(beginning with your most recent)

COMPANY NAME AND ADDRESS _____ _____
TELEPHONE: _____
DESCRIBE THE WORK YOU DO _____ _____
STARTING DATE: _____
STARTING SALARY \$ _____ CURRENT SALARY \$ _____

COMPANY NAME AND ADDRESS _____ _____
TELEPHONE: _____
DESCRIBE THE WORK YOU DID _____
STARTING DATE: _____
QUITTING DATE: _____
STARTING SALARY \$ _____ FINAL SALARY \$ _____

COMPANY NAME AND ADDRESS _____ _____
TELEPHONE: _____
DESCRIBE THE WORK YOU DID _____ _____
STARTING DATE _____ QUITTING DATE _____
STARTING SALARY \$ _____ FINAL SALARY \$ _____

MAY WE CONTACT THE EMPLOYERS LISTED ABOVE? _____ IF NOT, INDICATE WHICH
YOU DO NOT WISH US TO CONTACT.

BOARD OF LAKE TOWNSHIP TRUSTEES

EMPLOYMENT APPLICATION

NAME: _____

DATE: _____

POSITION APPLIED FOR: _____