

## APPLICATION FOR EMPLOYMENT

3720 Keewahdin Road, Fort Gratiot, Michigan 48059 www.fortgratiot.us

Fort Gratiot Charter Township is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of non-job-related medical condition or handicap, or any other legally protected status.

YOU MUST COMPLETE ALL SECTIONS OF THE APPLICATION. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION AND YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT. PRINT OR TYPE. ALL SIGNATURES REQUIRED.

Position Applied Fo	or:			Date of Application:	
Referral Source:	☐ Social Media	Website	☐ Newspaper	☐ Employment Agency	Relative
Friend	☐ Walk-In	Other-Please	Specify:		
Name: Last, First, Mi	ddle				
Current Address, C	:/S/Z:				
Phone:		Ema	il:		
Valid Driver Licenso	e? 🗌 Yes 🔲 No	Number:		State Iss	ued:
If you are under 18	, can you furnish a	work permit?	☐ Yes ☐ No	☐ Not Applicable	
Have you filed an a	pplication here be	fore?  Yes	☐ No   If yes, give	e date:	
			n this country becau will be required upon en	se of Visa or Immigration Sta	tus?
Are you on a lay-of	f and subject to re	call?	s 🗌 No		
Availability: 🗌 Full	Time  Part Tim	ne 🗌 Any	Date available to b	egin work:	
Are you able to per	form the essential	functions of the j	ob to which you are	applying? ☐ Yes ☐ No	0
Have you been con	victed of a felony?	Yes No	(Conviction will not no	ecessarily disqualify from emplo	yment.)
lf yes, please expla	in:				

## **Employment History** – An Equal Opportunity Employer

List your last three employers (no matter the time frame) immediately preceding the date of this application, beginning with your most recent. If you have had more than three employers during the last three years, please list <u>all</u> employers within the last three years. Additional employers may be listed on a separate sheet.

Company Name/Address/CSZ:	Supervisors Name/Title:	From:	Starting Salary:
	Title Held (if each)	T	Fadina Calana
	Title Held (if any):	To:	Ending Salary:
Telephone No:			
Work performed/duties:	·	·	•
Reason for leaving:			
Company Name/Address/CSZ:	Supervisors Name/Title:	From:	Starting Salary:
	Title Held (if each)	T	Fording Colony
	Title Held (if any):	To:	Ending Salary:
Telephone No:			
Work performed/duties:		1	
Reason for leaving:			
-			
Company Name/Address/CSZ:	Supervisors Name/Title:	From:	Starting Salary:
			,
	Title Held (if any):	То:	Ending Salary:
Telephone No:			
Work performed/duties:		l	
Reason for leaving:			
If presently working, may we con	tact your present employer? 🗌 Ye	es 🗌 No	
Special Skills and Quality	fications		
	cations acquired from employment or o	other experience inc	ludina computer knowledge
Sammanizo oposiai simile ana quamie	actions adjunct from employment or	outer experience, me	daing compater knowledge

## Education/Military/References

	High School	Vocational/Technical	College/University/Graduate
School Name & City, State:			
Did you Graduate?	☐ Yes	☐ Yes	☐ Yes
If not, number of years completed:	□ No	☐ No	□ No
Major/Minor, Degree, Certificate:			
Have you ever serve	ed in the U.S. Military?	No If yes, Branch:	
Subject to recall?	Yes No	Honorably Discharge	d? ☐ Yes ☐ No
memberships which status: (e.g. apprent	h may reveal sex, race, religior	n, national origin, age, ance fications, honors/awards receive	ng your application. You may exclude estry, or handicap or other protected ed, extra-curricular activities, volunteerism,
Provide three refer Name/Title	ences, not related to you, willin City/State:	g to provide a character or Telephone	professional reference.  Relationship
ivame/ ride	City/State.	Тетернопе	Relationship
Do you have any rel	atives working for Fort Gratiot Cha	arter Township at this time?	☐ Yes ☐ No
If yes, please state t	heir name and relationship.		
	Name		Relationship

## Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I agree and understand that any employment offer may be conditioned upon the results of the post-offer, pre-employment medical examination and drug screening test.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand that false, misleading, or incorrect information given in my application or interview(s) will be grounds for disqualification from further consideration or for discharge from employment if I am hired. I agree to abide by all rules and regulations of the Charter Township of Fort Gratiot if I am hired. I also understand that the Charter Township of Fort Gratiot is an at will employer with the right to terminate with or without cause.

A	Applicant Signature - REQUIRED			Date		
Please Note: A rés Any résumé submitt					o replace this application to the accepted.	
	DO	NOT WRITE	BELOW THIS	LINE		
Interview Date(s):						
Committee Member	s:					
Remarks:						
HIRE DATE	BOARD APPI	ROVED DATE	START DATE		HOURS	
DEPARTMENT	PC	OSITION		ANNUAL S	SALARY or HOURLY WAGE	

DEPARTMENT HEAD SIGNATURE

DEPARTMENT HEAD PRINTED NAME