

Employment Application

	A	pplicat	tion	Info	rma	ition		
Full Name:					Date:			
	Last	Firs	st .			M.I.		
Address:	Street Address		Apartment/Unit #					
	City					State	ZIP Code	
Phone:				Email				
Date Availa	ble: So	ocial Securit	y No.:			Desired	Salary: \$	
Position App	plied for:							
Are you a ci	itizen of the United States?	YES	NO	If no, a	re you	authorized to wo	YES rk in the U.S.?	NO
Have you e	ver worked for this company	YES √? □	NO	If yes, v	when?_			
Have you e	ver been convicted of a felo	YES ny? □	NO	Are you	u 18 yrs	s. of age or older	? YES□ NO□	
If yes, expla	in:							
		E	Educ	atio	n			
High Schoo	l:		Address	:				
From:	To:	Did you g	raduate	YES	NO	Diploma:		
College:			Address	:				
From:	To:	Did you g	raduate?	YES	NO	Degree:		
Other:			Address	:				
From:	To:	Did vou o	araduate	YES	NO	Degree:		

References Please list three professional/work/school references that are not relatives or personal acquaintances. Relationship Full Name: And/or Title: Company: Phone: Address: Relationship And/or Title: Full Name: Phone: ____ Company: Address: Relationship And/or Title: Full Name: Company: Phone: Address: **Previous Employment** Phone: Company: Address: Supervisor: Ending Salary:\$ Starting Salary:\$ Job Title: Responsibilities: _____ To:____ Reason for Leaving: From: YES NO May we contact your previous supervisor for a reference? Company: Phone: Supervisor:____ Address: Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: _____ To:____ Reason for Leaving: _____ From: YES NO May we contact your previous supervisor for a reference? П

Previous Employment continued		
Company:	Phon	e:
Address:	Superviso	or:
Job Title: Starting S	alary: <u>\$</u> Ending	Salary: <u>\$</u>
Responsibilities:		
From: To:	Reason for Leaving:	
May we contact your previous supervisor for a reference?	YES NO	
Please identify and explain any gap in employment longer th	an three (3) months:	
Military	Service	
Branch:	_	To:
Rank at Discharge:	Type of Discharge:	
If other than honorable, explain:		
Briefly describe duties and skills acquired through military	or volunteer service: (include d	ates):

Continue -

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge on this application (and accompanying resume, if applicable). I understand that any false or misleading representations or omissions made on the application or during the hiring process may disqualify me from further consideration for employment and may result in discharge even if discovered at a later date.

I understand that employment may be conditioned upon successfully passing a medical examination and pre-employment drug screen as a condition of employment.

I hereby authorize persons, schools, my current employer (if applicable) and previous employers and other organizations to provide the Village of Diamond with any requested information regarding application or suitability for employment and I completely release all such persons or entities from any and all liability related to the providing or use of such information.

I understand that my employment is at-will which means that I may terminate the employment relationship at any time and for any reason with or without notice, and that the Village of Diamond has the same right. I understand that no one has the authority to enter into any agreement contrary to the preceding sentence, except for a written agreement signed by an administrative representative of the Village of Diamond and notarized.

Signature:	Date:

Authorization to Obtain Criminal Background Reports

I authorize the Village of Diamond to obtain criminal background report(s) and/or investigate criminal background reports. I understand that these reports might include, but not limited to, search of my criminal background, and verification of my identification. I agree that this disclosure/authorization, in original or copy form, is valid for all current background reports.

I understand that the Village of Diamond may use such criminal background reports for employment purposes.

Signature:	Date:	
Full Printed Name:		

A valid picture form of identification will be required, (i.e. Driver's License, State I.D.)