



Charter Township of Independence Application for Employment

APPLICANT INFORMATION

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Cell Phone: _____ Home Phone: _____

Email: _____ Social Security No: _____

Date Available: _____ Desired Pay: \$ _____

Position applying for: _____

Are you legally authorized to work in the U.S.? YES NO Are you 18 years of age or older? YES NO

Have you ever worked for Independence Township? YES NO If yes, when? _____

List all relatives currently employed at the Township:

EDUCATION

ELEMENTARY SCHOOL: _____ City/State: _____

Grades Completed: _____

JUNIOR HIGH SCHOOL: _____ City/State: _____

Grades Completed: _____

HIGH SCHOOL: _____ City/State: _____

Did you graduate? YES NO Diploma / GED: _____

COLLEGE: _____ City/State: _____

Did you graduate? YES NO Degree / Diploma: _____

OTHER: _____ City/State: _____

Did you graduate / complete? YES NO Degree / Diploma / Certificate: _____

EMPLOYMENT HISTORY

List all jobs held in the past ten (10) years starting with your present or most recent job.
Attach additional sheets if necessary.

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 Employed from: _____ thru _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 Employed from: _____ thru _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
 Address: _____ Supervisor: _____
 Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
 Responsibilities: _____
 Employed from: _____ thru _____ Reason for Leaving: _____
 May we contact your previous supervisor for a reference? YES NO

ADDITIONAL INFORMATION

List any special training or skills that would be of benefit in the job for which you are applying.
(Language, machine operation, software, CPR, etc.)

REFERENCES

List three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

EQUAL EMPLOYMENT OPPORTUNITY COMMISSION INFORMATION (OPTIONAL)

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.

RACIAL OR ETHNIC GROUP

- | | | |
|--|---|---|
| <input type="checkbox"/> American Indian/Alaskan | <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> White/Caucasian | <input type="checkbox"/> Other |

GENDER

- | | |
|---------------------------------|-------------------------------|
| <input type="checkbox"/> Female | <input type="checkbox"/> Male |
|---------------------------------|-------------------------------|

MILITARY SERVICE

- | | |
|---|---|
| <input type="checkbox"/> Pre-Vietnam Era | <input type="checkbox"/> Vietnam Era |
| <input type="checkbox"/> Post-Vietnam Era | <input type="checkbox"/> Disabled Veteran |

HOW DID YOU HEAR ABOUT THIS POSITION?

- | | | |
|--------------------------------------|---|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Company Employee | <input type="checkbox"/> Professional Publication |
| <input type="checkbox"/> Job Fair | <input type="checkbox"/> Placement Office | <input type="checkbox"/> Website |
| <input type="checkbox"/> Other _____ | | |

DISCLAIMER AND SIGNATURE

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

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.

Signature: _____ Date: _____