

# APPLICATION FOR EMPLOYMENT

Date: \_\_\_\_\_

Last Name	First	Middle

## Jackson Township

In order that your application may be properly evaluated it is essential that all of the following questions be answered as carefully and completely as possible.

If you need more space for your answers, please attach a separate sheet. Please add any additional information (resume, transcript) which will help us in placing you where you are best qualified.

"If you are hired by Jackson Township, you will be required by federal law to provide certain personal information including your name, address, date of birth, and Social Security number. You must, upon hiring, attest, under penalty of perjury, that you are one of the following:

1. A citizen or naturalized citizen of the United States, or
2. An alien who has been lawfully admitted for permanent residence in the United States, or
3. An alien who is authorized by the U.S. Immigration and Naturalization Service to work in the United States."

All persons hired will be required to produce for the inspection and copying of the employer one or more documents listed below:

List A	List B	List C
Identity and Employment Eligibility	Identity	Employment Eligibility
<ul style="list-style-type: none"> <li>* United States Passport</li> <li>* Certificate of U.S. Citizenship</li> <li>* Certificate of Naturalization</li> <li>* Unexpired Foreign passport with attached Employment Authorization</li> <li>* Alien Registration Card with photograph</li> </ul>	<ul style="list-style-type: none"> <li>* A State issued driver's license or I.D. card with photograph, or information, including name, sex, date of birth, height, weight, and color of eyes.</li> <li>* Specify State</li> <li>* U.S. Military Card</li> <li>* Other (specify document and Issuing authority)</li> </ul>	<ul style="list-style-type: none"> <li>* Original Social Security Number Card (other than a card stating it is not valid for employment)</li> <li>* A birth certificate issued by State, county, or municipal authority bearing a seal or other certification.</li> <li>* Unexpired INS employment Authorization Specify form # _____</li> </ul>

Upon hiring, you must, within three business days, produce either one document from "List A" or one each from "Lists B & C". DO NOT SUBMIT OR PRODUCE ANY LISTED DOCUMENTS UNLESS YOU ARE TOLD THAT YOU HAVE BEEN HIRED.

**AN EQUAL OPPORTUNITY EMPLOYER**

Name	Last	First	Middle
Social Security #			
Present Address	No.	Street	
	City	State	Zip
Phone No.	( )		
Permanent Address	No.	Street	
	City	State	Zip
Phone No.	( )		
In Case of Emergency Notify	Name	Address	Phone No.
Are you related to anyone who works for Jackson Township? Yes ___ No ___ If yes, please state the name(s) of the employee(s) or person(s) and the relationship			

Position applying for	Date Available	Salary/Wage Expected
Who referred you to the township?		
Have you ever worked for us? Yes ___ No ___ If yes, when?		
Have you used a computer? Yes ___ No ___		
What software have you used?		
Maintenance Operator Applicants: List machines & equipment you operate:		

School	Name and Location	State if Graduated and Degree	Major Subject(s)	Minor Subject(s)
High School		Yes ___ No ___ Degree		
College(s)		Yes ___ No ___ Degree		
Technical, Professional, Other		Yes ___ No ___ Degree		
Rank in graduating class (e.g., top 1/3, middle 1/3, bottom 1/3)		High School	College	
GPA - A =	Overall	College Major		
Scholastic honors, scholarships, assistantships, etc.				
Attending school now? Yes ___ No ___		Where?	Degree or type of program:	

List in order with LAST employer FIRST. Include volunteer experience, if related. Account for past 10 years.

May we contact your present employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Employed from	Employed to	Job Title	Supervisor	Salary Start - Final -
Company		Location	Phone No.	Reason for leaving

Description of duties

Employed from	Employed to	Job Title	Supervisor	Salary Start - Final -
Company		Location	Phone No.	Reason for leaving

Description of duties

Employed from	Employed to	Job Title	Supervisor	Salary Start - Final -
Company		Location	Phone No.	Reason for leaving

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Description of duties

Employed from	Employed to	Job Title	Supervisor	Salary Start - Final -
Company		Location	Phone No.	Reason for leaving

Description of duties

Excluding religious and/or political activities, please add any information about your interests that you feel may be pertinent.

Branch of Service	Date Entered	Date discharged or separated
Major duties		
Service Schools attended		

Are you willing to submit to physical examinations required by the township    Yes \_\_\_\_\_    No \_\_\_\_\_

(Any such exam would occur after a conditional job offer is made)

List three references who are not relatives or previous supervisors:

Name	Address	Phone number	Occupation	Years Known

**BE SURE TO READ THE MATERIAL BELOW - SIGN WHERE INDICATED**

I certify that the statements I have made in this application and attachments are true and I authorize Jackson Township to investigate the accuracy and completeness of this information. I hereby give permission to the Township or its duly authorized representative, to contact any persons or companies named in this application other than my present employer.

It is understood that, as prerequisite to consideration for employment, I agree to submit to such future examinations, physical or other, as may be required by the township. Such examinations may include drug testing. The Township will pay the reasonable cost of any such examination which may be required.

In the event of my employment, I expressly understand that any false or misleading statements made by me in this application or in connection with my physical examination will be sufficient grounds for immediate dismissal from employment.

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the Township and me for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Township unless made in writing and signed by the Township Clerk.

If an employment relationship is established, I understand I have the right to terminate my employment at any time, for any reason, and that the Township also has that right. I also understand that if I am hired the employment relationship will remain as described in the preceding sentence, and that no relationship to the contrary will exist by virtue of any other agreement, representation or contract, expressed or implied, unless a written agreement expressly designated to be an employment contract is signed by me and the Township Clerk. Without limiting the generality of the above, I specifically agree that I will have no contractual rights as a result of any employee or supervisor's handbook. Shall be required to take a Drug Test, Back Ground check & Physical.

DATE \_\_\_\_\_

Signature \_\_\_\_\_