



EMPLOYMENT APPLICATION
GROSSE ILE TOWNSHIP
c/o Township Clerk's Office, 9601 Groh Road
Grosse Ile, MI 48138

Name _____
(Last) (First) (Middle)

Address _____
(Number & Street) Apt # (City) (State) (Zip)

Home Phone Number _____ Work Phone Number _____

18 Years or Older? Yes _____ No _____

Position Desired or Area of Interest:

1. _____ 2. _____

Schedule Desired: Full Time _____ Permanent _____ Part-Time _____

Person to notify in case of emergency: _____
Name

Address Home Phone Business Phone

Are you eligible for employment in the United States?

Yes _____ No _____ Alien Number (If any?) _____

What starting salary range do you consider appropriate?

\$ _____ to \$ _____ per _____ Hour _____ Day _____ Week _____

Have you previously applied for employment with the Township?

Yes _____ No _____ If so, date or position _____

Have you ever been employed by the Township?

Yes _____ No _____ If so, date and position _____

Is any additional information relative to a different name necessary to check work record?

Yes _____ No _____ If yes, explain _____

Who referred you to the Township? Agency _____ Advertising _____
Employee _____ Other _____

EDUCATIONAL BACKGROUND

1. High School:

School Name and Location _____

Did you graduate? _____ Yes _____ No _____ Number of Years Completed _____

2. College:

School Name and Location: _____

Course of Study _____ Did you graduate? _____ Yes _____ No _____

Number of Years Completed _____ Degree obtained? _____ Yes _____ No _____

3. Trade School:

School Name and Location _____

Course of Study _____ Did you graduate? _____ Yes _____ No _____

Number of Years Completed _____ Degree obtained? _____ Yes _____ No _____

4. Other:

School Name and Location _____

Course of Study _____ Did you graduate? _____ Yes _____ No _____

Number of Years Completed _____ Degree obtained? _____ Yes _____ No _____

Please indicate any professional, trade, office, technical or other skills, and abilities possessed by you (i.e. typing, shorthand, office machines, dictaphone, programming, laboratory, CRT/personal computer).

SKILL	LENGTH / KIND OF TRAINING	YEARS OF EXPERIENCE
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HEALTH INFORMATION

I have been provided with a copy of the job description of the position for which I am applying.

Yes _____ No _____

If the answer to the above question is yes, are you able to perform these tasks with or without accommodation?

Yes _____ No _____ Yes, with accommodation _____

If you answered the above question "Yes, with accommodation", how would you perform the task and with what accommodation (s)?

NOTICE OF HANDICAPPER RIGHTS

If you have a physical, mental or medical impairment which would interfere with your ability to perform in a position at the Township but which may be accommodated by, for instance, the purchasing of equipment or devices, the provision of readers or interpreters or the restructuring or altering of work schedules, the Michigan Handicappers Civil Rights Act requires that you notify the Township in writing of your need for accommodation within 182 days after you become aware or should reasonably have known that the accommodation was needed.

NOTICE OF MEDICAL EXAMINATION

Any offer of employment is contingent upon your ability to pass **medical and psychological examination** and **drug screen** prior to the commencement of employment.

CONVICTION RECORD

Have you ever been convicted of a crime? Yes _____ No _____

If yes, explain when, where and the nature of all criminal convictions?

Are there any felony charges pending against you now? Yes _____ No _____

If yes, describe: _____

Township policy does not necessarily render conviction of a crime an absolute bar to employment. Such facts as the seriousness and nature of the offense or violation, how many years ago the offense occurred and rehabilitation will be considered by the Township in relation to the specific job which you seek.

MILITARY

If you have served, indicate period from _____ to _____

Branch _____

Reserve status _____

LIST OF PREVIOUS EMPLOYERS – MOST RECENT FIRST

Note: Please give accurate, complete information on all full or part time positions held.

Dates: (Month and Year) From _____ To _____
Employer _____
Address _____
Phone # _____ Final Salary _____
Supervisor's Name _____ Type of Business _____
Title or Position _____
Responsibilities/Duties:

Reason for Leaving:

Dates: (Month and Year) From _____ To _____
Employer _____
Address _____
Phone # _____ Final Salary _____
Supervisor's Name _____ Type of Business _____
Title of Position _____
Responsibilities/Duties:

Reason for Leaving:

Dates: (Month and Year) From _____ To _____
Employer _____
Address _____
Phone # _____ Final Salary _____
Supervisor's Name _____ Type of Business _____
Title of Position _____
Responsibilities/Duties:

Reason for Leaving:

Dates: (Month and Year) From _____ To _____
Employer _____
Address _____
Phone # _____ Final Salary _____
Supervisor's Name _____ Type of Business _____
Title of Position _____
Responsibilities/Duties:

Reason for Leaving:

APPLICANT'S STATEMENT

I certify that the information contained in this application is correct to the best of my knowledge. I acknowledge that any misrepresentation or omission regarding any requested information may result in rejection of this of this application or my dismissal from employment at any time.

I authorize the references and previous employers listed above to provide any and all information concerning any previous employment and pertinent information, including disciplinary information, they may have, personal or otherwise. I also authorize the Grosse Ile Township Board to provide any and all information, including disciplinary information, concerning my employment with the Township, personal or otherwise, to any subsequent prospective employer. I release all parties from all liability for any damage that may result. I specifically waive any right to be notified under Section 6 (3) (a) of the Michigan Bullard-Plawski Act of the release of personnel file information by previous employers and the release of personnel file information to prospective employers by the Township of Grosse Ile

I understand that neither this document, any discussion nor any offer of employment constitutes a contract for future employment. In further consideration of my employment, I agree to conform to the rules and regulations established by Grosse Ile Township Board. Further, I understand and agree that my employment and compensation can be terminated at any time, with or without cause, with or without notice, and without regard to the date of payment of my wages or salary, at the option of either the employer or myself. I understand that no person or persons other than the Grosse Ile Township Board has the authority to enter into any agreement to employ, any agreement of employment for any specific period of time, or to make any agreement contrary to the foregoing, unless contained in a written employment agreement signed by myself and the Grosse Ile Township Board.

I understand that my application will remain active for a period of six months, after which time it will no longer be considered. I understand that the Township of Grosse Ile guarantees privacy and confidentiality of all information contained within this application and resume.

Signature: _____ Date: _____

