



## EMPLOYMENT APPLICATION

**PLEASE PRINT**

\*Date \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: \_\_\_\_\_ Message Telephone: \_\_\_\_\_

Eighteen years old, or older? Yes  No

Are you legally eligible for employment in this country? Yes  No   
(Proof of U.S. citizenship or immigration status will be required upon employment).

Have you been convicted of a felony in the past seven (7) years? Yes  No

If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### POSITION/TYPE OF WORK DESIRED

Indicate the position for which you are applying: \_\_\_\_\_

What is your minimum hourly pay requirement? \_\_\_\_\_

Date available for work: \_\_\_\_\_

Do you have any commitments to another employer that might affect your employment with us? \_\_\_\_\_

\*This application will be considered only for employment purposes by the employer for a period of 180 calendar days from the date hereof, after which this application will be destroyed and applicant must, in order to be considered for employment, complete and refile a new application form.

47 Cole St

Quincy

Michigan

49082

517.639.9065

[www.Quincy-MI.org](http://www.Quincy-MI.org)



This institution is an equal opportunity provider

## **EDUCATION**

Name of High School \_\_\_\_\_ Did you graduate? \_\_\_\_\_

Community/Junior College \_\_\_\_\_ Did you graduate? \_\_\_\_\_

Major/Degree \_\_\_\_\_

Name of College \_\_\_\_\_ Did you graduate? \_\_\_\_\_

Major/Degree \_\_\_\_\_

Other \_\_\_\_\_

Please list job specific skills or training programs completed \_\_\_\_\_

\_\_\_\_\_

## **MILITARY EXPERIENCE**

Branch of military service \_\_\_\_\_ Grade/Rank \_\_\_\_\_

Date from: \_\_\_\_\_ to \_\_\_\_\_ Date obligation ends: \_\_\_\_\_

Briefly describe your duties \_\_\_\_\_

\_\_\_\_\_

## **EMPLOYMENT HISTORY- Start with most recent employer**

Employer \_\_\_\_\_

Address \_\_\_\_\_

Nature of Business \_\_\_\_\_ Your job title \_\_\_\_\_

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

Beginning pay rate \_\_\_\_\_ Last Pay Rate \_\_\_\_\_

Duties \_\_\_\_\_

\_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Employer\_\_\_\_\_

Address\_\_\_\_\_

Nature of Business\_\_\_\_\_ Your job title\_\_\_\_\_

Start Date\_\_\_\_\_ End Date\_\_\_\_\_

Beginning pay rate\_\_\_\_\_ Last Pay Rate\_\_\_\_\_

Duties\_\_\_\_\_

Reason for Leaving\_\_\_\_\_

Employer\_\_\_\_\_

Address\_\_\_\_\_

Nature of Business\_\_\_\_\_ Your job title\_\_\_\_\_

Start Date\_\_\_\_\_ End Date\_\_\_\_\_

Beginning pay rate\_\_\_\_\_ Last Pay Rate\_\_\_\_\_

Duties\_\_\_\_\_

Reason for Leaving\_\_\_\_\_

Employer\_\_\_\_\_

Address\_\_\_\_\_

Nature of Business\_\_\_\_\_ Your job title\_\_\_\_\_

Start Date\_\_\_\_\_ End Date\_\_\_\_\_

Beginning pay rate\_\_\_\_\_ Last Pay Rate\_\_\_\_\_

Duties\_\_\_\_\_

Reason for Leaving\_\_\_\_\_

## GENERAL INFORMATION

Have you previously applied for employment at the Village?

Yes  No If yes, when? \_\_\_\_\_

Have you previously been employed at the Village?

Yes  No

Are any of your relatives employed by the Village?

Yes  No

If yes, please list name and department: \_\_\_\_\_

Please include any other information you think would be helpful in considering you for employment, including additional work experience, articles/books published, activities, accomplishments, and so forth. Exclude all information indicative of age, height, weight, sex, race, religion, color, marital status, national origin, and handicap/disability unless you wish to request a disability accommodation.

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## APPLICANT'S REPRESENTATION FOR EMPLOYMENT

Should I be employed by the Company, I agree to conform to the Village's rules and regulations, and agree that as an at-will employee my employment and compensation can be terminated, at any time, for any reason, with or without notice, at the option of either the Village or myself.

I certify that the information provided on this application is true and complete to the best of my knowledge and agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for termination if discovered at a later date.

I authorize persons, schools, current employer and previous employers, and organizations named in this application to provide the Village with any relevant information that may be required. I further release all parties providing information from any and all liability or claims for damages whatsoever that may result from this information's release, disclosure, maintenance, or use.

Any doctor, hospital, or testing laboratory may conduct medical tests and I hereby give my consent to having all information released necessary for the Employer to determine my abilities to perform job duties now or in the future. I understand that

my employment may be contingent on my passing a physical, drug and alcohol examination.

I understand and agree that because of the nature of the Village's business, the Village has the right to investigate and search any and all equipment and/or property of or on the Village's premises, including the undersigned and any property I possess on/in the Village's premises, facilities or equipment at any time without advance notice.

The Village is an Equal Opportunity Employer. The Village does not discriminate and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for employment on a basis prohibited by local, state, or federal law.

If employed, I understand that my employment is for no definite period of time, and if terminated, the Village is liable only for wages or salary earned as of the date of termination.

I understand and agree in the event I am hired, denied employment or terminated, and a dispute, claim or controversy arises out of my employment or denial thereof pursuant to any state or federal statutes, regulation and/or rules, I hereby agree that my sole, only and exclusive remedy shall be to submit said dispute, claim or controversy to arbitration in accordance with the current arbitration provisions adopted by the Village for final and binding resolution of my claim. I further understand the Village agrees to be bound by a properly rendered decision of the arbitrator.

This application has been read by me in its entirety.

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Signature

Date