



## APPLICATION FOR EMPLOYMENT

**IMPORTANT: It is the policy of the Village of Plymouth to provide equal opportunity with regard to all terms and conditions of employment. The Village 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.**

APPLICANT INFORMATION					
Last Name		First		M.I.	Date
Street Address				Apartment #	
City		State		ZIP	
Phone		E-mail Address			
Cell Number		Social Security No.(Optional)		Desired Salary	
Position Applied for:			Date available for work:		
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
				YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
If you are under 18 years old, can you provide a work permit if required?		YES <input type="checkbox"/>	NO <input type="checkbox"/>		

EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three references that are not related to you that you have known at least one year.</i>	
Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	
Full Name	Relationship
Company	Phone (     )
Address	

PREVIOUS EMPLOYMENT			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibility			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibility			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ( )	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibility			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date



**APPLICATION FOR EMPLOYMENT**

**AN EQUAL OPPORTUNITY EMPLOYER**

**TRAINING/PERSONAL INFORMATION**

COURSES PERTAINING TO JOB APPLIED FOR: \_\_\_\_\_

ACTIVITIES, AWARDS, SPORTS, ETC: \_\_\_\_\_

DO YOU HAVE ANY COMMITMENTS (I.E., SECOND JOB, SCHOOL, ETC.) WHICH MIGHT INTERFERE WITH, OR ADVERSELY AFFECT YOUR EMPLOYMENT? YES: \_\_\_\_\_ NO: \_\_\_\_\_

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

DO YOU POSSESS A VALID DRIVERS LICENSE? YES: \_\_\_\_\_ NO: \_\_\_\_\_

DO YOU POSSESS A COMMERCIAL DRIVERS LICENSE? YES: \_\_\_\_\_ NO: \_\_\_\_\_

IF NO, CAN YOU OBTAIN ONE PRIOR TO EMPLOYMENT? YES: \_\_\_\_\_ NO: \_\_\_\_\_

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? YES: \_\_\_\_\_ NO: \_\_\_\_\_

ARE YOU A RESIDENT OF OHIO? YES: \_\_\_\_\_ NO: \_\_\_\_\_

If not, are you willing to become a resident upon employment? YES: \_\_\_\_\_ NO: \_\_\_\_\_



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PLEASE READ EACH OF THE FOLLOWING PARAGRAPHS CAREFULLY. INDICATE YOUR UNDERSTANDING OF, AND CONSENT TO, THE CONTENTS AND CONDITIONS OF EACH PARAGRAPH BY PLACING YOUR INITIALS AT THE END OF EACH PARAGRAPH. IF YOU HAVE ANY QUESTIONS REGARDING THESE PARAGRAPHS, CONTACT THE EMPLOYER BEFORE INITIALING THE PARAGRAPH.

**1.** I Understand and accept that, if I am selected for employment, my employment may be conditioned upon my passing any medical examination that the employer deems necessary to determine whether I can physically perform the essential functions of the position, which reasonable accommodation when necessary. I understand and accept that this may include drug, alcohol or substance abuse testing.

Initials: \_\_\_\_\_

**2.** If employed, I understand and accept that, depending on the department in which I am applying for employment, I may be required to work evening shifts or night shifts, including weekends and be on call and work mandatory overtime hours.

Initials: \_\_\_\_\_

**3.** I understand and accept that if any information required in this application is found to be falsified or intentionally excluded, my application may be disqualified from further consideration. I further understand and accept that if I am employed by the employer, I may be subject to disciplinary actions, including termination, if any information required by this application has been falsified or intentionally excluded.

Initials: \_\_\_\_\_

**4.** I understand and accept that the employer requires a high degree of integrity confidentially of its employees. I also understand and accept that the various law enforcement and informational agencies that exchange information and data with the employer require that the employer's employees do not have a past record of unlawful activities. Therefore, I understand and accept that, depending on the department in which I am applying for employment, it may be necessary for the employers to investigate my background for any criminal or unlawful activity.

Initials: \_\_\_\_\_

**5.** I hereby authorize the employers, schools and personal references named in this application to provide information regarding me to the employer. I further authorize the release of personnel, academic and other records to the employer.

Initials: \_\_\_\_\_

**APPLICANT STATEMENT AND WAIVER**

I certify that all the information submitted by me on this application is true and complete, and 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.

I expressly authorize, without reservation, the Village of Plymouth, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the Village of Plymouth, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this application remains active for 30days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it may be necessary for me to reapply and fill out a new application.

In consideration of my employment, I agree to conform to the company's rules and regulations, and I understand that these rules and/or the employee handbook do not form a contract of employment, either expressed or implied, and I agree that my employment and compensation can be terminated, with or without cause and with or without notice, at any time, at either my or the Village of Plymouth's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause and with or without notice, at any time by the Village of Plymouth.

I further understand and acknowledge that the Village of Plymouth is a Drug Free Workplace, and as such all potential employees will be required to undergo pre-employment drug testing. I further understand and acknowledge that certain positions in the Village of Plymouth due to their safety nature are required to undergo random drug and alcohol screening throughout their employment.

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**(APPLICANT'S SIGNATURE)**

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**(DATE)**