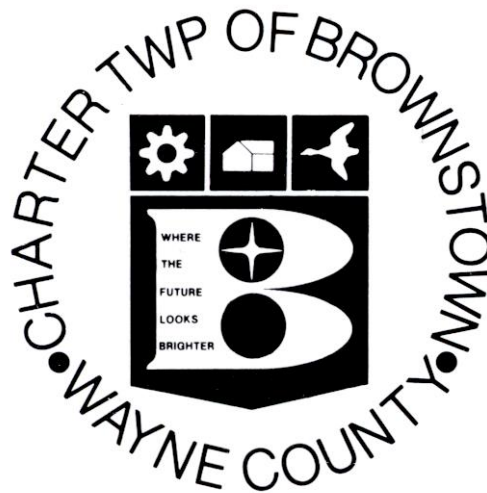


Name: _____

APPLICATION FOR EMPLOYMENT



Board of Trustees:

Supervisor
Andrew T. Linko

Clerk
Brian C. Peters

Treasurer
Michael D. Eberth

Maureen R. Brinker

Patrick J. Killian

Steven R. Allen

Clyde P. Walters

**21313 Telegraph Road
Brownstown, Michigan 48183
(734) 675-0910**

APPLICATION FOR EMPLOYMENT

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, handicap, or veteran status.

P E R S O N A L	Last name			First	Middle	Date	
	Street Address					Primary Telephone ()	
	City, State, Zip					Secondary Telephone ()	
	Have you previously applied for employment with Brownstown Township? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes: Month and Year _____ Position _____					Email	
	Position Desired					Pay Expected	
	Apart from absence for religious observance, are you available for full-time work? <input type="checkbox"/> Yes <input type="checkbox"/> No If not, what hours can you work? _____					Will you work overtime if asked? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	Are you legally eligible for employment in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you over 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No	If not, are you able to obtain a work permit? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have a CDL? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please specify: <input type="checkbox"/> A <input type="checkbox"/> B
	Other special training or skills (languages, machine operation, etc.)					When will you be available to begin work?	

E D U C A T I O N	School	Name & Location	Course of Study	# of Years Completed	Did you Graduate?	Degree or Diploma
	Graduate				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Business/Trade/ Technical				<input type="checkbox"/> Yes <input type="checkbox"/> No	
	High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Membership in Professional or Civic Organization (Exclude those which may disclose your race color, religion, or national origin)

EMPLOYMENT

Please give accurate, complete full-time and part-time employment record. Start with your present or most recent employer.

1	Company Name	Telephone ()
	Address	Employment Dates (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____ _____	Reason for Leaving

2	Company Name	Telephone ()
	Address	Employment Dates (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____ _____	Reason for Leaving

3	Company Name	Telephone ()
	Address	Employment Dates (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____ _____	Reason for Leaving

4	Company Name	Telephone ()
	Address	Employment Dates (State month and year) From To
	Name of Supervisor	Weekly Pay Start Last
	State Job Title and Describe Your Work _____ _____	Reason for Leaving

We may contact the employers listed above unless you indicate those you do not want us to contact.	DO NOT CONTACT	
	Employer Number _____	Reason _____
	Employer Number _____	Reason _____

MILITARY	Did you serve in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, in what branch? _____
	Describe any training received relevant to the position for which you are applying. _____ _____	

FOR POLICE APPLICANTS ONLY:

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged, or sealed by a court? Yes No If yes, describe in full.

S I G N A T U R E	The information provided in this Application for Employment is true, correct, and complete. If employed, any misstatement or omission of fact on this application may result in my dismissal.
	I understand that acceptance of any offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.
	If you decide to engage an investigative consumer report agency to report on my credit and personal history, I authorize you to do so. If a report is obtained you must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.
	_____ Signature
	_____ Date

FOR EMPLOYER'S USE ONLY
REFERENCE CHECK

Employer	Person Contacted	Results
1		
2		
3		
4		

TEST RESULTS

Tests Administered	Raw Score	Rating	Analysis and Comments

INTERVIEW RESULTS

Interviewer Name and Comments