

APPLICATION FOR EMPLOYMENT

We appreciate your interest in Bainbridge Township (the "Township"). The Township is an equal employment opportunity employer. The Township's policy is not to discriminate against any applicant or employee based on race, color, sex, sexual orientation, gender identity, religion, national origin, age (40 and over), disability, military status, genetic information or any other basis protected by applicable federal, state, or local laws. The Township's policy to comply with all applicable federal, state and local laws respecting consideration of unemployment status in making hiring decisions.

		GENERAL I	NFORMATION	
		Please complete all requeste	d information. Use ink and print.	
Today's Date:	s Date: Position Applying For:			
Name (Last)	(First)	(Middle)	Minimum Salary Desired	Date Available for Work
Street Address			Are you at least 18 years old?	es 🗆 No
City	State	Zip	Telephone (Home) Telephor	ne (Mobile)
Email Address				
	rder for us to ve l? □ Yes □ N		Are you available to work overtime a □ Yes □ No If yes, are you available weekdays?	
1 900, picaco pico			(You do not need to disclose schedu religion, a disability or a medical cor	uling restrictions related to your
 Have you previously worked for or applied for a position with the Township either as an employee or through an employment agency? □ Yes □ No If yes, please explain when and, if employed, in what capacity: 		 Are you related to or in a close personal relationship with anyone now employed at the Township? (An answer of "Yes" will not automatically disqualify you from the position for which you are applying.) □ Yes □ No If yes, state name(s) and where they are located. 		

PERMISSION TO WORK

Are you legally authorized to work in the United States? $\hfill\square$ Yes $\hfill\square$ No

Will you now or in the future require sponsorship for employment visa status (e.g. H-1B status)?
Ves No

REFERRAL INFORMATION

How did you learn about the Township?	
Employment Agency (state name):	School (state name):
Reputation of Firm	□ Newspaper ad (name of paper):
Referral (state name):	□ Other:

WORK EXPERIENCE

Please specify your complete full-time and part-time employment history, including self-employment. You may include any verified work performed on a volunteer basis. Begin with your most recent employer. If you require additional space, please use the reverse side of this page and/or the following page.

	Company Name	Telephone	
		-	
	Address	Employed (Month	and Year)
		From	То
1	Name, Title, and Phone Number of Supervisor	Monthly Wages	
		Start	Last
	Job Title, and Work Responsibilities	Reason for Leavi	ng:

	Company Name	Telephone	
	Address	Employed (Month	and Year) To
2	Name, Title, and Phone Number of Supervisor	Monthly Wages	10
		Start	Last
	Job Title, and Work Responsibilities	Reason for Leavi	ng:

	Company Name	Telephone
	Address	Employed (Month and Year) From To
3	Name, Title, and Phone Number of Supervisor	Monthly Wages Start Last
	Job Title, and Work Responsibilities	Reason for Leaving:

(Employment record continued on next page.)

WORK EXPERIENCE (CONTINUED)

Please specify your complete full-time and part-time employment history, including self-employment. You may include any verified work performed on a volunteer basis. Begin with your most recent employer. If you require additional space, please use the reverse side of this page and/or the following page.

	Company Name	Telephone	
	Address	Employed (Month	and Year)
		From	То
4	Name, Title, and Phone Number of Supervisor	Monthly Wages	
		Start	Last
	Job Title and Work Responsibilities	Reason for Leavi	ng:

All employers including your current employer may be contacted to verify the information you provide. May we contact your current employer prior to any offer of employment? Yes <a>No <a>No

PROFESSIONAL REFERENCES

Individuals not related to you. Business references preferred.

Name	Occupation	Phone	Address	Years Known and Capacity

EDUCATION & TRAINING

Please include name, street, city, state and zip code for each school.

School	Name and Location of School	Number of Years Completed	Degree	Type of Course/Major
Graduate				
College				
High School				
Business/Trade/ Technical				

JOB-RELATED SKILLS AND QUALIFICATIONS

Please summarize your job-related skills and qualifications:

ADDITIONAL EMPLOYMENT INQUIRIES

If applying for a position that will include driving:

If hired, can you provide a valid driver's license? \Box Yes \Box No

If hired, and required for the position, can you provide a valid CDL? \Box Yes \Box No

If hired, you may be required to provide evidence of insurance or insurability.

Emergency Contact Person

Name:_____ Phone Number:_____

APPLICANT'S STATEMENT & ACKNOWLEDGMENT

THIS APPLICATION IS NOT COMPLETE UNTIL IT IS FULLY COMPLETED, SIGNED, AND ALL STATEMENTS BELOW HAVE BEEN READ AND INITIALED.

<u>Initial:</u> I certify that all of the information furnished on this application and during the application process is true, complete and correct to the best of my knowledge. I understand that any misrepresentation or omission of facts called for may result in refusal to hire or, if hired, may result in my dismissal at any time regardless of when the false answer or omissions are discovered.

Initial: I recognize that this employment application is not an offer of employment. I agree that if I am hired by the Township, I will be an at-will employee, unless otherwise provided in an applicable collective bargaining agreement, meaning that either the Township or I may end the employment relationship at any time with or without cause or notice. I understand that only the Board of Trustees of Bainbridge Township, and no manager, supervisor, or other representative of the Township, has authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the at-will employment relationship, and with respect to any agreement entered into by the Board of Trustees, any such agreements must be in writing and signed by the Board of Trustees and by me or my authorized representative.

Initial: I further understand and agree that, except for my at-will employment status, if hired, my wages, hours, working conditions, job assignment(s), and compensation rate(s) will be subject to change by the Township.

Initial: I understand that the Township may share the information contained in this application with other Township employees for employment and administrative purposes and hereby consent to such transfer.

- Initial: I hereby authorize, to the extent allowed by applicable federal state and local laws, the Township to conduct its own investigation of my references, employment history and education and, further, authorize the references and prior employers I have listed to disclose to the Township information related to my employment history and qualifications for the position for which I am applying, without giving me prior notice of such disclosure.
- Initial: I agree to undergo a pre-employment physical examination consistent with federal and state law.
- Initial: I agree to submit to legally permissible drug testing upon an offer of employment from the Township and prior to starting work. I agree that any offer of employment is contingent upon my receiving a result satisfactory to the Township.

My signature below certifies that I agree to be bound by the terms and conditions stated in this application, which contains all the understandings between the Township and me concerning the topics addressed herein, and supersedes any prior inconsistent understandings between the Township and me on such issues.

APPLICANT'S SIGNATURE

DATE

This application will only be considered for 30 days. If you have not been hired within 30 days of submitting this application and you wish to continue to be considered for employment, you must complete another application.