



3271 Cheshire Road
 Delaware, OH 43015
 Phone: (740) 548-6350
 Fax: (740) 548-7458
 www.berlintwp.us

APPLICATION FOR EMPLOYMENT

Berlin Township does not discriminate in hiring or employment on the basis of race, color, ancestry, religion, sex, national origin, age, veteran status, marital status, non-disqualifying disability, genetic information, or on any other basis protected by law. No question on this form is intended to secure information to be used for such discrimination. Please contact the Fiscal Office if you require accommodation to complete the application or interview process. **Only complete applications will be considered.**

Date of Application: _____

Date you are available to work: _____

Name _____

Address _____

Daytime Telephone No. () _____

Evening Telephone No. () _____

Mobile Telephone No. () _____

Email address _____

All other Names by which you were known in any prior employer's records: _____

GENERAL

Name of position for which you are applying	Have you previously applied for employment with Berlin Township? Yes No
Applying for position as: Full Time	If yes, when? _____ Location(s)? _____
Part Time	Have you ever worked for the Township? Yes No
Seasonal	If yes, when? _____ Department(s)? _____
If applying for seasonal work, are you available to work during the school term?	Do you have any relatives or friends working for the Township or serving the Township as an elected official? Yes No
Yes No	If yes, name: _____
Please circle the day(s) you would prefer to work. S M T W T F S	Are you legally eligible for employment in this country? Yes No (Proof of U.S. Citizenship or immigration status will be required upon employment)
Please circle the shift that you are applying for Day Evening Night	If required for the job for which you're applying, have you ever been denied bonding? Yes No
Are you at least 18 years of age?	
Yes No	

LICENSES/PROFESSIONAL CERTIFICATIONS

Attach all proofs of licenses, education and certifications but only if required for the position applied for:

Professional License:

Number	State	Type	Exp. Date
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Professional Certifications:

Number	State	Type	Exp. Date
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Number	State	Type	Exp. Date
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Number	State	Type	Exp. Date
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Complete if position for which you're applying requires driving:

Do you have a valid Driver's License? Yes No

If yes, (license #); (State); (Type); (Exp. Date)

Have you ever had your driver's license revoked? Yes No

Have you had any accidents during the past three years? Yes No How many?

Have you been convicted of or pled guilty to any moving violations during the past three years?

Yes No How many?

Explain any "yes" answers:

Have you ever been convicted of a felony or misdemeanor? Yes No

Do not list any convictions which have been expunged or sealed. A YES answer is not an automatic bar to employment. Each case is considered individually for job-relatedness. If YES, please explain:

EDUCATION		High School	College	Other
	Name			
	Location			
	Number of years completed			
	Course of Study			
	Did you graduate?	Yes No	Yes No	Yes No

EMPLOYMENT HISTORY	Provide your employers for the last 10 years. If a resume is provided, this information must still be completed. If relevant work history is further back, use the reverse side of this application. You may also provide information about volunteer work, if you wish, but please omit any information that would disclose your race, gender, age, marital status, ancestry, national origin, genetic information, religious or political affiliation, disability, or membership in any legally protected class.			
	From	To	Employer	Telephone #
	May we contact for reference?		Complete Address	
	Yes No			
	Starting Rate/Salary	Starting	Job Title	Ending Rate/Salary Final Job Title
	Immediate Supervisor	Summarize the nature of work and job responsibilities		
	Reason for leaving			
	From	To	Employer	Telephone #
	May we contact for reference?		Complete Address	
	Yes No			
	Starting Rate/Salary	Starting	Job Title	Ending Rate/Salary Final Job Title
	Immediate Supervisor	Summarize the nature of work and job responsibilities		
Reason for leaving				

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SKILLS SUPPLEMENTAL REFERENCES

List all special licenses, permits, certifications and level or credit hours, if required by the job you're seeking. (CPR, lifeguard, First Aid, etc.- proof of these accomplishments will be required, if hired).

TYPE

LEVEL

**EXPIRATION
DATE**

List equipment, machinery, software or special skills related to your ability to perform the functions of the position for which you are applying. Include your skill level and/or years of experience.

Please use this space to elaborate on any background, experience, special skills, or qualifications that you believe should be considered in evaluating your qualifications for employment and/or for this particular job. You may include hobbies, volunteer experience, and other activities you believe are relevant. Omit any information that would disclose your race, gender, age, marital status, ancestry, national origin, genetic information, religious or political affiliations, disability, or membership in any legally protected class.

List 3 references that are not past employers (Examples: teachers/professors, customers/clients, coaches, etc.)

	1	2	3
Name			
Address			
Phone			
Position/Occupation			
How long known?			

STATEMENT AND VERIFICATION OF APPLICANT

I certify that all information I have provided during the application process with Berlin Township is true, complete, up to date, and correct. I fully understand that if any information provided by me is found to be false, incomplete, or misrepresented in any respect, such finding is sufficient to disqualify me from further employment consideration or, if I have already been hired, to immediately terminate my employment with Berlin Township.

I understand that no question on this application, nor anything used at any point in the employment application process, is designed or intended to discriminate unlawfully or to gain information upon which an unlawfully discriminatory decision could be based.

I understand that, if I am hired, I am an employee at will and, therefore, am free to resign at any time just as the Township is free to terminate my employment at any time for any reason not contrary to law. Further, if hired, I acknowledge that I am responsible for reading any Employee Manuals and/or collective bargaining agreements applicable to me; for following all rules, regulations, policies and requirements of the Township; for reading and understanding new policies, regulations, rules, and requirements of the Township as they become effective; for asking questions about any such policies, regulations, rules, and requirements that I did not understand. I acknowledge that neither this application nor any other document, conversation, representation or statement from or by Berlin Township and/or any of its employees constitutes a contract or employment for any specified period of time or definite duration. My signature below also signifies that no one has made any promises to me of employment for a specified period of time or a definite duration. I understand that no supervisor or representative of the Township is authorized to make any assurances or promises to the contrary and that no implied, oral or written agreements contrary to the foregoing at-will employment arrangement are valid unless they are in writing and signed by the Township Trustees.

If I am hired, I authorize the Township to deduct any monies I owe to the Township from my paychecks, including my final paycheck. Additionally, if I have removed without authorization and/or failed to return any property belonging to the Township, the Township may deduct the value of that property from my paychecks, including my final paycheck.

If I am hired, I understand that I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete certain forms in this regard. Further, Berlin Township may conduct pre-employment drug screening and I understand that if I refuse to submit to a drug screen or if I test positive for the presence of illegal drugs, I will automatically be disqualified for further consideration for a period of six months. In that case, after six months have expired, I may reapply to Berlin Township for available positions and submit to a new drug screen if I am offered employment.

NOTE TO CANDIDATE: DO NOT SIGN UNTIL YOU HAVE READ AND UNDERSTAND THE FOREGOING STATEMENTS

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement as well as all terms and conditions of employment as defined by Berlin Township.

Signature: _____ Date: _____

