

CHARTER TOWNSHIP OF MADISON

4008 S. ADRIAN HWY.

ADRIAN, MI 49221

APPLICATION FOR EMPLOYMENT

Please print legible using black ink or typewriter.

If space allowance, for answering questions is insufficient, the answer(s) should be continued on a separate piece of white paper.

Date: _____ Position applied for: _____

Name: _____
(Last) (First) (Middle)

Present Address: _____
(No. and Street) (City, State, and Zip code)

Permanent Address (if different than above): _____

Home Phone: _____ Other Contact Number: _____

Are there any specific hours or days of the week that you are unable to work? _____, if so, when?

Type of employment (Full or part-time): _____ Salary desired: _____

Are you currently employed? _____ If yes, may we contact current employer? _____

Have you ever worked and/or applied to the Township before? _____ If so, when? _____

How did you hear about this opening? _____

Do you have any family and/or friends that currently work for the Township? _____

If so, who? _____

MILITARY SERVICE

Do you have any US Military experience? _____ Date entered: _____

Date discharged: _____ Branch: _____ Last rank held: _____

Type of discharge: _____, if other than HONORABLE, please explain: _____

Primary job / MOS: _____

Please brief describe those duties: _____

The Charter Township of Madison is an equal opportunity employer and will not discriminate against any applicant on the basis of any characteristic that is protected by state and/or federal law. Michigan law requires that a person with a disability or handicap, requiring special accommodations to perform the essential duties of the job applied for, must notify the employer, in writing, within 182 days of the date that the need is known or should have been known.

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EMPLOYMENT HISTORY (Please list current and former employers, most recent first)

DATES (TO / FROM)	NAME, ADDRESS, SUPERVISOR AND CONTACT NO.	SALARY START / ENDING	LAST POSITION HELD / RESPONSIBILITIES	REASON FOR LEAVING
To:		Starting:		
From:	Supervisor:	Ending:		
To:		Starting:		
From:	Supervisor:	Ending:		
To:		Starting:		
From:	Supervisor:	Ending:		
To:		Starting:		
From:	Supervisor:	Ending:		
To:		Starting:		
From:	Supervisor:	Ending:		

May we contact the employer(s) listed above? _____

If not, please list:

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CRIMINAL HISTORY

Have you ever been arrested, taken to the police station for investigation, or fingerprinted regarding breaking any law(s)? If in doubt, answer yes and explain:

_____ (Yes / No)

If yes, explain and list location and date(s):

Have you ever been convicted of a crime, excluding minor traffic offenses, including all alcohol related offenses? _____ (Yes / No)

If yes, explain and list location and date(s):

Drivers License Number / State / Expiration:

Please list all traffic offenses, including accidents, for the past 3 years, include City and State:

Has your drivers license ever been suspended or revoked? _____ (Yes / No)

If yes, explain:

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PLEASE READ THE FOLLOWING STATEMENT CAREFULLY, BEFORE SIGNING, TO INDICATE YOUR UNDERSTANDING

I understand that, prior to being offered employment, I may be requested to take an employment examination. In the event that I have a disability that would affect my ability to take the test, I will so notify the Township, prior to the administration of the test, so that reasonable accommodations can be made. The Township reserves the right to require medical documentation regarding the need for accommodation.

I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements may result in termination.

I understand and agree that, if hired, my employment is for no definite period of time and may, regardless of the date of payment, of my wages and salary, be terminated with or without cause, at any time, with or without notice, unless covered by a recognized collective bargaining agreement.

I authorize investigation of any and all statements contained in this application for any employment-related purpose. I release the listed references, all employer(s) past and present (except those specifically indicated) to provide the Township with any and all applicable information that they may have, including opinions to character. I hereby release the listed references, current and former employers, and the Township of all liability resulting from release and possible use of the information provided.

(Date)

(Signature)

(FOR EMPLOYER USE ONLY)

(Do not write below this line)

Interviewed by: _____ Date: _____ Hired: _____ (Yes / No)

Starting date: _____ Position: _____ Wage: _____

Notes:

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