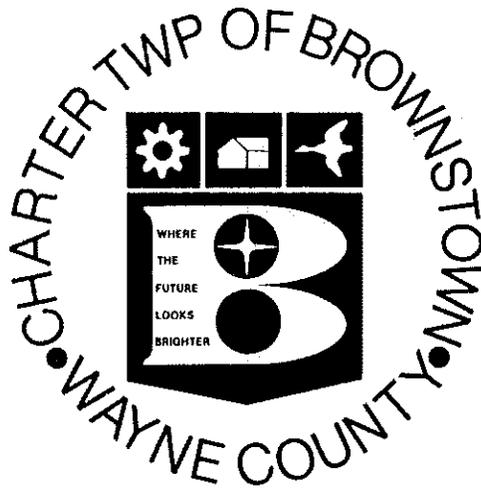


Name: _____

APPLICATION FOR EMPLOYMENT



Board of Trustees:

Supervisor
Andrew T. Linko

Clerk
Sherry A. Berez

Treasurer
Michael D. Eberth

John J. Cronin

John O. Knappmann

Brian C. Peters

Clyde P. Walters

Departments:

Human
Resources

Donna Hall

Police

James Sclater
Director of Public
Safety

Fire

Jeff E. Drouillard
Chief

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? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, describe in full.

S I G N A T U R E	<p>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.</p> <p>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.</p> <p>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.</p>
_____	_____
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