

# Application For Employment

CHARTER TOWNSHIP OF CLINTON  
40700 Romeo Plank Road, Clinton Township, MI 48038

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status and in compliance with state and federal regulations on handicappers civil rights. Under the Michigan handicappers' Civil Rights Act, a handicapper may allege a violation of the Act regarding the failure to accommodate only if the handicapper notifies the employer in writing of the need for accommodation within 182 days after the date the handicapper knew or reasonably should have known that an accommodation was needed.

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED  
PLEASE PRINT OR TYPE

Date: \_\_\_\_\_

Position(s) Applied For: \_\_\_\_\_ Would you consider a part-time position? \_\_\_\_\_

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Address: \_\_\_\_\_ How long? (From/To) \_\_\_\_\_  
(Number & Street) (City) (State) (Zip)

Preferred method of communication:

Home Phone: \_\_\_\_\_  Cell Phone/Text: \_\_\_\_\_  Email Address: \_\_\_\_\_

In Case of Emergency Please Notify:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

## General Information

Are you over 18 years of age? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you on lay-off? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, are you subject to recall? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have any relatives working for the Township? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, who? \_\_\_\_\_

Have you filed an application with the Charter Township of Clinton previously? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes, when? \_\_\_\_\_ For what positions? \_\_\_\_\_

Were you ever employed by the Charter Township of Clinton previously? \_\_\_\_\_ Yes \_\_\_\_\_ No  
If yes: \_\_\_\_\_  
Position Department Dates

Are you authorized to work in the USA? \_\_\_\_\_ Yes \_\_\_\_\_ No

Will you now or in the future require sponsorship for employment visa status? \_\_\_\_\_ Yes \_\_\_\_\_ No

Note: Employment is contingent upon verification of employment eligibility under the provisions of the Immigration Reform and Control Act of 1986 and subsequent legislation.

Have you ever been dismissed or asked to resign from any employment? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, give date, where you worked and explanation: \_\_\_\_\_

Have you ever been refused employment? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, state by whom and what reason. \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, completely describe including location and date: \_\_\_\_\_

Note: A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of violation, and rehabilitation will be considered.

Are you capable of performing, with or without reasonable accommodation (special assistance, equipment or other help), the activities involved in the job or occupation for which you have applied? \_\_\_\_\_ Yes \_\_\_\_\_ No

Who referred you to the Township? \_\_\_\_\_

### EDUCATION & TRAINING

	High School or Equivalent	Vocational/ Technical	College	Graduate
Name of School, Address/City/State				
Did you graduate?	_____ Yes _____ No	_____ Yes _____ No	_____ Yes _____ No	_____ Yes _____ No
Credits earned?				
Degree or certificate Received:	NA			
Describe Course of Study:				

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates, and extra-curricular activities that pertain to the position(s) for which you are applying.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List professional, trade, business group memberships and offices held, and volunteer work (excluding groups the name and character of which indicate race, color, gender, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected class):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Driving Information & History:**

Driver's License No. \_\_\_\_\_ Chauffeur License No. \_\_\_\_\_  
Commercial Driver' License (CDL) No. \_\_\_\_\_  
Types of CDL Endorsements: \_\_\_\_\_  
List Traffic Citations for Last Five Years: \_\_\_\_\_

**Training & Experience:**

Typing Speed \_\_\_\_\_ W.P.M.  
Computer Skills (include software packages) \_\_\_\_\_  
\_\_\_\_\_  
Equipment or Machines: \_\_\_\_\_  
Hand Tools: \_\_\_\_\_  
Other: \_\_\_\_\_

**References (Do not include relatives or former employers)**

Name	Address	Telephone
_____	_____	_____
_____	_____	_____

**Military Service Record**

Have you had any experience in the Armed Forces of the United States of America or in a state national guard? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, which branch? \_\_\_\_\_ Rank at discharge \_\_\_\_\_  
Active Duty from \_\_\_\_\_ to \_\_\_\_\_

Nature of Duties: \_\_\_\_\_

Date of discharge \_\_\_\_\_ Were you honorably discharged? \_\_\_\_\_ Yes \_\_\_\_\_ No

Note: A dishonorable discharge from the military will not necessarily be a bar to employment.

**Employment Experience**

List each job held in chronological order, beginning with the present or last job first.

**Employer** \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting Date \_\_\_\_\_ Starting Title \_\_\_\_\_ Starting Earnings \_\_\_\_\_

Ending Date \_\_\_\_\_ Ending Title \_\_\_\_\_ Ending Earnings \_\_\_\_\_

Starting Duties \_\_\_\_\_

Ending Duties \_\_\_\_\_

Last Immediate Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

What did you like *Best* about this job? \_\_\_\_\_

What did you like *Least* about this job? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer without jeopardizing your position? \_\_\_\_\_

**Employer** \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting Date \_\_\_\_\_ Starting Title \_\_\_\_\_ Starting Earnings \_\_\_\_\_

Ending Date \_\_\_\_\_ Ending Title \_\_\_\_\_ Ending Earnings \_\_\_\_\_

Starting Duties \_\_\_\_\_

Ending Duties \_\_\_\_\_

Last Immediate Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

What did you like *Best* about this job? \_\_\_\_\_

What did you like *Least* about this job? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer without jeopardizing your position? \_\_\_\_\_

**Employer** \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting Date \_\_\_\_\_ Starting Title \_\_\_\_\_ Starting Earning \_\_\_\_\_

Ending Date \_\_\_\_\_ Ending Title \_\_\_\_\_ Ending Earnings \_\_\_\_\_

Starting Duties \_\_\_\_\_

Ending Duties \_\_\_\_\_

Last Immediate Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

What did you like *Best* about this job? \_\_\_\_\_

What did you like *Least* about this job? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer without jeopardizing your position? \_\_\_\_\_

**Employer** \_\_\_\_\_ Type of Business \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting Date \_\_\_\_\_ Starting Title \_\_\_\_\_ Starting Earning \_\_\_\_\_

Ending Date \_\_\_\_\_ Ending Title \_\_\_\_\_ Ending Earnings \_\_\_\_\_

Starting Duties \_\_\_\_\_

Ending Duties \_\_\_\_\_

Last Immediate Supervisor's Name \_\_\_\_\_ Title \_\_\_\_\_

What did you like *Best* about this job? \_\_\_\_\_

What did you like *Least* about this job? \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

May we contact this employer without jeopardizing your position? \_\_\_\_\_

**IF THERE ARE MORE THAN FOUR PREVIOUS EMPLOYERS, ATTACH ADDITIONAL SHEET.**

**ACKNOWLEDGEMENTS, RELEASES, AND OTHER IMPORTANT INFORMATION  
READ CAREFULLY**

1. The information in this application is complete and correct. I understand and acknowledge that if I have misrepresented or omitted any information, either in this application or in any interview, my application may be rejected or, if I have already been hired, my employment may be terminated.
2. I understand that the Township may request information from my current and former employers or, if I am hired by the Township, that prospective future employers may request information from the Township. Under either case, I authorize the Township and my current and former employers to provide any requested information, including any disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records, regardless of when they were issued. I waive the right to receive written notice of any such disclosure, and I release the Township and my current or former employers from any liability in connection with such disclosure. This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.
3. I understand that any employment offer is conditioned upon the results of a drug screening test and a post offer pre-employment medical examination.
4. I have read the job description(s) for the position(s) for which I am applying. I acknowledge that if I am disabled and require an accommodation to enable me to perform a job, under Michigan law, I must notify the Township of the need for an accommodation, in writing, within 182 days of when I knew or should have known of such a need, or I will be unable to rely on the Township's statutory duty under Michigan law to accommodate, if any.
5. In consideration of my employment, I agree to conform to the rules and regulations of the Charter Township of Clinton. I further acknowledge I will be on a probationary status from my date of hire. As a probationary employee, I understand that (a) I must work during the probationary period without interruptions; (b) my employment and compensation can be terminated at any time, with or without cause and with or without notice, at the option of either the Township or myself; (c) no officer or representative of the Township has now or has had in the past any authority to enter into any agreement for employment for any specified period of time or to make any agreement which is contrary to or a modification of the above-described employment relationship except an authorized official from the Human Resources Department, and that any such agreement or representation must be in writing and signed by both myself and an authorized Township representative; and (d) after my probationary period ends, I will be subject to the terms and conditions of a collective bargaining agreement and Civil Service rules.
6. I agree that in consideration for my employment or continued employment that any claim or lawsuit arising out of my employment with, or my application for employment with, the Township must be filed no more than six (6) months after the day of the action that is the subject of the claim or lawsuit. While I understand that the statute of limitations for claims arising out of an employment-related action may be longer than six (6) months, I agree to be bound by the six (6) month period of limitations set forth herein, and I WAIVE ANY STATUE OF LIMITATIONS TO THE CONTRARY.

Name – Please Print \_\_\_\_\_ Date \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

**DISCLOSURE TO APPLICANT REGARDING CONSUMER REPORTS**

**You have applied to the Charter Township of Clinton (“the Township”) for employment. The Township may obtain consumer reports about you from a consumer reporting agency or agencies and may use the reports in deciding whether to hire you. These reports may include the following types of information: names and dates of previous employers, reason for termination of prior employment, job performance, work experience, accidents, etc.**

**Consumer reports may also contain information concerning your driving record, workers compensation claims, credit history, bankruptcy proceedings, criminal history, educational history, social security number and date of birth verification from the Social Security Administration. Information may be obtained from federal, state, or local governments, agencies, and former employers.**

**If you are hired by the Township, the Township may obtain consumer reports about you from time to time and may use the reports in deciding whether to retain you, promote you, reassign you, or for other employment purposes.**

**AUTHORIZATION**

**I understand that the Township may not obtain consumer reports about me unless I authorize it to do so. I also understand that if I refuse to give the Township authorization to obtain consumer reports, my application for employment will not be considered.**

**I hereby authorize the Charter Township of Clinton to obtain consumer reports in connection with my application and during any future employment by the Township. The Township has disclosed and I understand that consumer reports may include but are not limited to my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, driving records, and any other public records and information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics, and trustworthiness. I authorize without reservation any party or agency contacted by the Township to furnish the requested information. I understand that I have the right to request the Township to provide me with the nature and substance of all information in its files regarding me as of the time of the request.**

**This authorization shall service as ongoing authorization to the Township to procure consumer reports about me at any time during my employment (or contract) period.**

**Name – Please Print \_\_\_\_\_ Date \_\_\_\_\_**

**Signature of Applicant \_\_\_\_\_**

**EQUAL EMPLOYMENT OPPORTUNITY DATA  
OPTIONAL**

**Information on this section will not be made available to those making employment decisions. This information is requested for statistical reporting purposes only. The data will be used to meet the federal government's reporting requirements under Executive Order 11246, which applies to federal contractors, Title VII of the Civil Rights Act of 1964 (as amended) and other regulations.**

**RACE/ETHNIC/GENDER IDENTIFICATION**

\_\_\_\_\_ **BLACK (not of Hispanic origin) – All persons having origins in any of the Black racial groups of Africa.**

\_\_\_\_\_ **ASIAN OR PACIFIC ISLANDERS – All persons having origins in any of the original people of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.**

\_\_\_\_\_ **AMERICAN INDIAN or ALASKAN NATIVE – All persons having origins in any of the original people of North America, and who maintain cultural identification through tribal affiliation or community recognition.**

\_\_\_\_\_ **HISPANIC – All persons of Mexican, Puerto Rican, Cuban, Central of South America, or other Spanish culture of origin, regardless of race.**

\_\_\_\_\_ **WHITE (not of Hispanic origin) – All persons having origins in any of the original people of Europe, North Africa, or the Middle East.**

\_\_\_\_\_ **MULTI-RACIAL (having parents of more than one of the broad race categories listed above) – If you select this category please also check the category above which is your predominant race (the race you are most often identified as).**

\_\_\_\_\_ **MALE**                      \_\_\_\_\_ **FEMALE**

**BIRTH DATE:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**Position(s) Applied For:** \_\_\_\_\_

**Indicate how you learned of this position(s):** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Refusal to fill out this form will not affect your application being considered.**