

Application for Employment

(Applicant must type or print legibly in ink)

Charter Township of Northville
Human Resources Department
44405 Six Mile Road
Northville, MI 48168
248-348-5800 - www.twp.northville.mi.us

Charter Township of Northville is an equal opportunity employer and shall consider all qualified applicants for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected category.

YOU MUST ANSWER ALL QUESTIONS COMPLETELY AND TRUTHFULLY. FAILURE TO DO SO WILL RESULT IN REJECTION OF YOUR APPLICATION (YOU WILL NOT BE CONSIDERED FOR EMPLOYMENT), OR, IF NOT DISCOVERED UNTIL A LATER DATE, MAY RESULT IN DISCIPLINE OR DISCHARGE FROM EMPLOYMENT.

Position(s) Applied for: _____

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone: _____ Cell: _____ E-mail address: _____

If you are applying for a position for which driving is a job requirement, do you presently have a valid Michigan driver's license? Type of license: Operator's license

Commercial Driver's License (CDL)

Driver's License No. _____

(A license check will be **conducted** for applicants for positions requiring a current driver's license)

Are you a relative by birth or marriage to any **Charter Township of Northville** "elected official or full time management employee? Yes No

If Yes: _____
Name Relationship

Are you under 18 year of age? (If yes, attach work permit) Yes No

Are you currently working? Yes No

Are you on lay off? Yes No

If Yes, are you subject to recall? Yes No

Will you submit to a drug screening test? Yes No

Have you ever been employed by **Charter Township of Northville**? Yes No

If Yes: _____
Position Department Dates

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? Yes No

(Proof of citizenship or immigration status may be requested upon employment)

Have you ever been fired? Yes No

If Yes, give date, where you worked and explanation: _____

Have you ever been convicted of a felony? Yes No

If Yes, give date, where you worked and explanation: _____

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

CHARTER TOWNSHIP OF NORTHVILLE

EDUCATION

	High School	Vocational/ Technical	College	Graduate
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School/Name, _____
City/State _____

Did you graduate? Yes No Yes No Yes No Yes No

(If No, number of
credit hours completed) _____

Degree/Certificate _____

Major/Minor _____

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, offices held, and volunteer work. You may exclude groups that would reveal race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected class:

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 that is directly related to the position you are applying for?

Yes No
If Yes, what branch? _____ Rank at discharge _____

Date of discharge _____ Were you discharged other than dishonorably? Yes No

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

CHARTER TOWNSHIP OF NORTHVILLE

EMPLOYMENT HISTORY

List each job held. Start with your present or last job first.

Employer	Dates	Work Performed
	"From To	
Address & Telephone		
Job Title	Hourly Rate/Salary	
	""Start Final	
Supervisor		
Reason(s) for Leaving		

Employer	Dates	Work Performed
	"From To	
Address & Telephone		
Job Title	Hourly Rate/Salary	
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Job Title	Hourly Rate/Salary	
	Start Final	
Supervisor		
Reason(s) for Leaving		

FOR POLICE AND FIREFIGHTER POSITIONS. Please check all that apply.

POLICE OFFICER REQUIREMENTS:

- I am a certified Police Officer in the State of Michigan
- I am currently enrolled in & attending a Police Academy
- I completed the Police Academy on _____
- I have completed MCOLES Reading & Writing Exam
Date Completed: _____
- I have completed MCOLES Physical Agility Test
Date Completed _____ Expires _____

FIREFIGHTER REQUIREMENTS:

- I am certified through the State of Michigan as a Firefighter II
- I possess a current, valid paramedic license
- I am certified in Advanced Cardiac Life Support (ACLS)
- I have completed the CWW Written Exam
Date Completed _____ Expires _____
- I have completed the CWW Physical Agility Testing
Date Completed _____ Expires _____

WAIVERS AND ACKNOWLEDGMENTS

Please read carefully before signing

1. I authorize the references and current and former employers listed in this application to give you any and all information concerning my current and previous employment and any pertinent information they may have, including disclosure of any disciplinary reports (even if more than four years old), and release all parties from any liability for any damages that may result from furnishing same to you. I further authorize you to release such information when such information may be requested by any prospective or subsequent employers without the need to provide me any notice of such disclosure.
2. I understand that the use of this application does not indicate that there are positions available, nor does it imply or create an employment contract. I understand that the only employment contracts are those specifically authorized by Municipality management that have been reduced to writing and have been executed by both the employee and an authorized representative of the Municipality. Accordingly, I understand that no employment contract, either expressed or implied, for any period, is created hereby should the Municipality hire me.
3. If hired, I understand that my employment is at-will (just cause for union employees), and can be terminated at any time, with or without notice, for any reason at the option of either the Municipality or me. Should the Municipality hire me, I agree to observe all the Municipality's policies, practices, and procedures currently in existence and new and revised ones that may be issued in the future.
4. I understand that any employment offer is conditional upon the result of the drug screening test, post offer pre-employment medical examination, and background investigation (when applicable based on the position sought).
5. I understand that if I have a physical, mental, or other impairment that would interfere with my ability to perform in a position but that may be accommodated by, for instance, the purchase of equipment or devices, the provision of readers or interpreters, or the restructuring or altering of work schedules, the Michigan Persons With Disabilities Civil Rights Act requires me to notify the Employer's Human Resources Department in writing of need for accommodation within 182 days after I knew or should reasonably have known that the accommodation was needed.
6. I agree that any lawsuit against the Municipality arising out of my employment or termination of employment, including but not limited to, claims arising under the State or Federal Civil Rights statutes, must be filed within six months of the event giving rise to claims or be forever barred. I waive any limitations period to the contrary. For circumstances in which the statutory period of limitations is less than six months, the statutory limit will apply.

I HAVE READ, UNDERSTAND, AND AGREE TO THE TERMS OF EACH OF THE ABOVE SIX (6) INDIVIDUAL STATEMENTS, AS INDICATED ABOVE.

SIGNATURE _____ Date _____