

10500 Reading Road • Evendale, Ohio 45241-2574 • Phone 513-563-2244

All Application questions must be answered completely and accurately in ink, and are subject to verification.

Application for Employment

	AP	PLICANT INFORMATION		
Date:				
Full Name:				
	Last	First		M.I.
Address:	Street Address	Apartment / (I Init #	
	olicot Address	Apartment	Jim #	
	City	State	Zip	
Home Phone:		Cell phone:		
Email Address:				
Position	on for which you are applying:			
		Depending on the position for which you are applying be one of several documents necessary for the App		
How did	you learn about this position:			
	What kind of position	are you applying for? Full Time ☐ Part	Time 🗌	Seasonal
If applying	for any Full Time or Part Time	position, are you at least 18 years of age?	Yes 🗌	No 🗆
If applying	for a position in the Police Dep	partment, are you at least 21 years of age?	Yes 🗌	No 🗌
If applyin	ng for a position in the Fire Dep	partment, are you at least 18 years of age?	Yes 🗌	No 🗆
		st 14 years of age as of June 1 of the year rovide written parent/guardian permission?	Yes 🗌	No 🗆
		form the essential functions of the position ith or without reasonable accommodation?	Yes 🗌	No 🗆
	•	worked for the Village of Evendale before? employment and position:	Yes 🗌	No 🗌
Are you able to	provide proof of your identity	and eligibility to work in the United States?	Yes 🗌	No 🗆
		Date available to start work? Wage Expectations?		
		requires the operation of a motor wing Driver's License information:		
-	State Issued Class / Type	Number	Ехр	iration Date
	31-			

The Village of Evendale provides equal employment opportunity to all qualified persons in accordance with applicable federal, state, and local equal opportunity laws which prohibit discrimination based on race, sex, age (as defined in the age Discrimination Employment Act), disability, religion, ancestry, color, sexual orientation, or national origin.

EDUCATION

High School:					
Name of High School	City	State			
Number of Years Completed Did you Graduate?	Diploma / Degree / Certificate?	<u> </u>			
Number of Years Completed Did you Graduate?	Dipioma / Degree / Certificate :				
If you did not Graduate, have you received a GED?	State where you were awarded the GE	D?			
Technical School, College, or University:					
Name of School	City	 State			
Name of General	Oity	olate			
Number of Years / Hours Did you Graduate? Completed	Diploma / Degree / Certificate?	Major / Area of Study?			
Are you currently attending any Police or Fire Academy Training, if applicable? If so, where?					
Have you been awarded any State Certifications? If so, which, from where, and when?					
De very held only licenses on other Drefees	ional Contifications 2. If an list from	on whom and walld through dates?			
Do you hold any licenses or other Professi	orial Certifications? If so, list fro	m where and valid inrough dates?			
Additional Information – You may use the factivities, honors, etc.	following area to include informa	tion such as school or employment awards,			

EMPLOYMENT HISTORY

List ALL employment for the last 15 years in chronological order, starting with your current or most recent position. Use multiple blocks for multiple positions with the same employer. Include any military time. Be sure to explain any gaps in your employment history. If you attach a resume you must also complete this section. Failure to completely answer all questions in this section may eliminate you from further consideration.

Employer:	Position:				
Address:	Phone #:				
Dates employed - From: To:	Reason for Leaving:				
Otastian Davi	Full Times on Don't Times	Have an Mante			
Starting Pay: Ending Pay:	Full Time or Part Time:	Hours per Week:			
Supervisors Name:	May we contact them for a reference?	Yes No □ □			
Brief description of Job Duties, Responsibilities, Supervisory Experience	e, Awards				
Employer:	Position:				
Address:	Phone #:				
Dates employed - From: To:	Reason for Leaving:				
Starting Pay: Ending Pay:	Full Time or Part Time:	Hours per Week:			
Supervisors Name:	May we contact them for a reference?	Yes No □			
Brief description of Job Duties, Responsibilities, Supervisory Experience, Awards					
Employer:	Position:				
Address:	Phone #:				
Dates employed - From: To:	Reason for Leaving:				
Starting Pay: Ending Pay:	Full Time or Part Time:	Hours per Week:			
Supervisors Name:	May we contact them for a reference?	Yes No			
Brief description of Job Duties, Responsibilities, Supervisory Experience, Awards					

EMPLOYMENT HISTORY (continued)

Employer:	Position:			
Address:	Phone #:			
Dates employed - From: To:	Reason for Leaving:			
Starting Pay: Ending Pay:	Full Time or Part Time: Hours per Week:			
Supervisors Name:	May we contact them for a reference?			
Brief description of Job Duties, Responsibilities, Supervisory Experience	, Awards			
Employer:	Position:			
Address:	Phone #:			
Dates employed - From: To:	Reason for Leaving:			
Starting Pay: Ending Pay:	Full Time or Part Time: Hours per Week:			
Supervisors Name:	May we contact them for a reference?			
Brief description of Job Duties, Responsibilities, Supervisory Experience, Awards				
Employer:	Position:			
Address:	Phone #:			
Dates employed - From: To:	Reason for Leaving:			
Starting Pay: Ending Pay:	Full Time or Part Time: Hours per Week:			
Supervisors Name:	May we contact them for a reference?			
Brief description of Job Duties, Responsibilities, Supervisory Experience	, Awards			

REFERENCES

Name:	Phone #:	Email:	Years Known	In What Capacity?

AUTHORIZATION AND UNDERSTANDING

- I certify that all information and documents provided by me within this Application for Employment or in connection with the employment application, interview, and pre-employment process are true, complete, and accurate.
- 2. I understand that any misstatement, falsification, misrepresentation, or intentional omission of any information of this Application for Employment or of any information at any time during the employment application, interview, and pre-employment process may disqualify me for further consideration for employment, or may result in the termination of my employment at any time if I am hired.
- 3. I understand that my failure or refusal to comply with all requirements for the position that I am applying for, including but not limited to the deadline for application, attachment of all required documents to this Application for Employment, and/or compliance with any age, education, certification, residency, or other requirements, will disqualify me for further consideration for employment.
- 4. If I require any special accommodations for any phase of the testing procedure, I understand that I must attach a separate written request and description of the requested accommodation to this Application for Employment.
- 5. I will participate in any interviews, tests, examinations, drug/alcohol screening, physical examinations, or any other procedures that may be required during the pre-employment process, and that a final offer of employment will be based in part on successful and acceptable results.
- My signature below authorizes the Village of Evendale to conduct an investigation of my background relative to
 my driving record, convictions, workers' compensation claims, credit history, educational background, and/or
 any other relative information.
- 7. I understand that the information contained in the employment application or my being invited to participate in any stage of the hiring process does not create, nor is intended to create, an employment contract between The Village of Evendale and myself.
- 8. I understand that an offer of employment is contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.
- 9. Unless otherwise indicated, I authorize any of the persons or organizations that I have named in this Application For Employment to provide The Village of Evendale with any and all information concerning my previous employment, education, or any other information that they might have, personal or otherwise, with regard to any of the subjects included in this Application for Employment or relative to my qualifications for employment. I hereby release all such persons or organizations from all liability from any damages which may result from furnishing such information.

By signing below, I acknowledge that I have read, understand, and agree with the above statements			
			
Applicants Signature	Date	Revised 1-26-2017	

Village of Evendale

E.E.O. DATA FORM

The following requested information in no way affects you as an individual or employee. The following information is used to evaluate (1) the effectiveness of the Villages recruitment efforts in reaching all segments of the population, (2) the validity of the Villages selection methods and (3) the objectivity of the Villages employment practices.

Please check the appropriate box and supply any additional information that is applicable.

1.	Sex		Male		Female
2.	Racial or Ethnic Group		American Indian		Asian
			Black		Hispanic/Latin American
			Caucasian or White		Other(Please specify)
3.	Physical Disability		No		
			Yes, Please describe		
4.	Title/Position Applying For:				
5.	Name (Optional)			Dat	e
6.	. How did you hear about the position?				