

10500 Reading Road • Evendale, Ohio 45241-2574 • Phone 513-563-2244 www.evendaleohio.org

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

Application for Employment

		Α	PPLICANT INF	ORMAII	ON			
Date:								
Full Name:					First			M.I.
Address:	Last							IVI.I.
Addicss.	Street Address			Apartment / Unit #				
	City				State		Zip	
Home Phone:	•			Cell pl	hone.		·	
riome riiome.				_ Oon pi				
Email Address:	-			-				
D. W.	(12.1							
Positi	on for which y	ou are applying	Depending on	the position	n for which you are	applyin	g, this Appl	lication may only
				eral docume	ents necessary for	the App	lication and	Interview process.
How dic	d you learn abo	out this position	n:					
	\/\hat	kind of positio	n are you applyi	na for?	Full Time	Port .	Time 🔲	Seasonal
If applying		·	ne position, are y	_			Yes 🗌	No □
	•				•	_	Yes 🗌	No □
If applying for a po			•		•	•	162	NO 🗀
If applying for a Se of t			east 14 years of provide written				Yes 🗌	No 🗌
	Are		erform the esse				Yes 🗌	No □
			with or without r	easonab	le accommoda	tion?		
		Have you eve	er worked for the	Village o	of Evendale bet	ore?	Yes 🗌	No 🗌
	If yes, p	rovide dates o	of employment a	nd positio	on:			
Are you able to	provide proof	of your identit	ty and eligibility t	to work in	the United Sta	ates?	Yes 🗌	No 🗌
•		•		Data ava	ilable to start w	ork?		
					Vage Expectati			
						•		
			ng requires the d llowing Driver's I					
Ve	mole, piease	provide the lor	nowing Driver 3 L	_1001130 II	nomation.			
-	State Issued	Class / Type	e Nu	mber			Evr	piration Date

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?	P 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		
Number of Years / Hours Did you Graduate? Completed	P Diploma / Degree / Certificate:	P Major / Area of Study?		
Are you currently attending any Police or F	Fire Academy Training, if applicat	ble? If so, where?		
Have you been awarded any State Certifications? If so, which, from where, and when?				
Do you hold any licenses or other Professional Certifications? If so, list from where and valid through 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:			
Starting Pay:	Ending Pay:	Full Time or Part Time:	Hours per Week:		
Cupaniaara Nama					
Supervisors Name:		May we contact them for a reference?	Yes No □		
Brief description of Job Duti	es, 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 Duti	es, Responsibilities, Supervisory Experience	r, Awards			
		La			
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? 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?	
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	

REFERENCES

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

AUTHORIZATION AND UNDERSTANDING

- 1. 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		