

DANBURY TOWNSHIP EMPLOYMENT APPLICATION

(Please print all information)

Date: _____

Are you over the age of 18? _____

Name: _____

Phone number: _____

Street address: _____

Date available for work: _____

City, State, Zip: _____

Rate of pay expected: _____

Position applied for: _____

SEE BELOW FOR POLICE-FIRE-EMS

Were you previously employed by us? _____

If yes, when? _____

Are you a U.S. citizen or do you possess a valid work visa? _____

Have you ever been bonded? _____ Have you ever been convicted of a felony? _____

If yes, describe the offense: _____

Will you work part-time or full-time? _____ Do any of your relatives work for us? _____

COMPLETE THIS SECTION IF YOU ARE APPLYING FOR A LAW ENFORCEMENT POSITION

Are you presently a certified peace officer in Ohio? _____

If yes, when and where did you complete your training? _____

How many hours of peace officer training do you currently have? _____

Are you currently employed by a police department in Ohio? _____

If yes, where and in what capacity? _____

COMPLETE THIS SECTION IF YOU ARE APPLYING FOR A FIRE OR EMS POSITION

What type of position are you applying for? _____

Have you had prior experience in this type of position? _____ If yes, please explain where and for how long: _____

You will need to provide a copy of your driver's license and copies of all certifications, licenses, degrees and any other documentation as it relates to your coursework, training or employment in fire or emergency medical services.

EDUCATIONAL RECORD

SCHOOL	NAME, CITY & STATE	COURSE OF STUDY	DID YOU GRADUATE?
HIGH	<hr/>	<hr/>	<hr/>
COLLEGE	<hr/>	<hr/>	<hr/>
OTHER	<hr/>	<hr/>	<hr/>

DESCRIBE ANY SPECIAL SKILLS YOU HAVE OR LICENSES YOU HOLD

MILITARY SERVICE RECORD

Were you in the United States Armed Forces? _____ If yes, what Branch? _____

Date of Duty from: _____ to: _____

Rank at Discharge: _____

List your duties in the service including any special training: _____

PERSONAL REFERENCES

(Do not list relatives or former employers)

Name: _____ Phone number: _____

Complete address: _____

Name: _____ Phone number: _____

Complete address: _____

Name: _____ Phone number: _____

Complete address: _____

EMPLOYMENT BACKGROUND

Name, address and telephone number of employer: _____

Type of business: _____ Your position: _____

Employed from: _____ to: _____ Rate of pay at leaving: _____

Describe your duties: _____

Reason for leaving: _____

Name of your supervisor: _____ May we contact him or her? _____

If yes, please provide telephone number for your supervisor: _____

Name, address and telephone number of employer: _____

Type of business: _____ Your position: _____

Employed from: _____ to: _____ Rate of pay at leaving: _____

Describe your duties: _____

Reason for leaving: _____

Name of your supervisor: _____ May we contact him or her? _____

If yes, please provide telephone number for your supervisor: _____

Name, address and telephone number of employer: _____

Type of business: _____ Your position: _____

Employed from: _____ to: _____ Rate of pay at leaving: _____

Describe your duties: _____

Reason for leaving: _____

Name of your supervisor: _____ May we contact him or her? _____

If yes, please provide telephone number for your supervisor: _____

It is the policy of Danbury Township to grant equal opportunity to all qualified persons without regard to race, color, gender, age, national origin, religion, physical or mental handicap or veteran status. To deny one's contribution to our efforts because he or she is a member of a minority group is an injustice, not only to the individual but to the Township. It is the intent and desire of the Township that equal employment opportunity will be provided in all areas of employment including promotions, wages and benefits.

SIGNATURE AND ACKNOWLEDGEMENT BY APPLICANT

1. The facts set forth in my application for employment are true and complete to the best of my knowledge.
2. I fully understand that any false statements made will automatically exclude my application for employment or, if employed, will be considered just cause for dismissal.
3. If considered for employment I understand that Danbury Township is a drug-free workplace, that it is mandatory to have a pre-employment drug screen and that a positive drug test will prohibit me from being offered employment.

Signature of applicant: _____ Date: _____

Return your completed application to:

The Danbury Township Board of Trustees
5972 Port Clinton Eastern Road
Marblehead, OH 43440

www.danburytownship.com
Telephone: (419) 732-3039 Fax: (419) 734-3137