

APPLICATION FOR EMPLOYMENT

VILLAGE OF CAPAC
 131 N. Main St., P.O. Box 218
 Capac, Michigan 48014
 Tx - (810) 395-4355

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application
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How did you learn about us?

Advertisement		Friend		Website/Facebook	
Employment Agency		Relative		Other	

Personal Information

Last Name	First Name	Middle Name
Street Address		
City		Zip Code
Phone Number	Email	Birthday
Do you have a valid Drivers License?		
Drivers License Number:		

Select the answer that applies to you:

If you are 18 years of age can you provide required proof of your eligibility to work?	Yes	No
Have you ever filed an application with us before?	Yes	No
Have you ever been employed with us before?	Yes	No

If yes, please list date of year of employment:		
Are you currently employed?	Yes	No
May we contact your employer?	Yes	No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <small>Proof of citizenship or immigration status will be required upon employment</small>	Yes	No
On what date would you be available to begin work?		
Are you available to work:	Full Time	Part Time
	Shift Work	Temporary
Are you currently subject to recall with any employer?	Yes	No
Can you travel if a job requires it?	Yes	No
Have you been convicted of a felony within the last 7 years? <small>Conviction will not necessarily disqualify an applicant for employment</small>	Yes	No
If yes, please explain:		

Do you have any physical impairment or any other impairment that will limit your ability to perform any of the duties of the job for which you are applying? If yes, please explain below.	Yes	No

Education

	Elementary School	High School
School Name and Location		
Years Completed		
	Undergraduate College/University	Graduate/ Professional
School Name and Location		
Years Completed		
Did you graduate from High School or have a GED?	Yes	No
If you went to college or trade school please list areas of study or degree(s).		
Describe any specialized		

training, apprenticeship, skills and extra-curricular activities	
State any additional information you feel may be helpful to us in considering your application	
List professional, trade, or business activities and offices held. You may exclude memberships which reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status.	

References

Give a full name, address, and phone number of 3 references who are not related to you and who are not a previous employer.
1.
2.
3.

Employment Experience

#1

Employer:		
Address:		
Phone:		
	Dates Employed	
	From	To
	Hourly Rate/Salary	
	Starting	Final
Job Title:		
Work Performed:		
Reason for Leaving:		

#2

Employer:		
Address:		
Phone:		
	Dates Employed	
	From	To
	Hourly Rate/Salary	
	Starting	Final
Job Title:		
Work Performed:		
Reason for Leaving:		

#3

Employer:		
Address:		
Phone:		
	Dates Employed	
	From	To
	Hourly Rate/Salary	
	Starting	Final
Job Title:		
Work Performed:		
Reason for Leaving:		

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

In the event of employment, I understand that false or misleading information given in my application or interview may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant	Date

FOR PERSONNEL ONLY

Arrange Interview	Yes	No
Remarks		
Interview Date		
Employed	Yes	No
Date of Employment		
Date of Employment		
Job Title		
Department		
Hourly Rate/Salary		
Interviewed/Hired By:		

Name and Title	Date
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Notes
