





Thank you for your interest in employment with Soldier Township. We are an Equal Opportunity Employer and consider all applicants based on qualifications and job-related requirements and criteria, without regard to race, color, creed, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, or any other legally protected status.

EMPLOYMENT	APPLICATION
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Please Print Clearly

Name (Last, First, M.I.)			
Any other names by which you are knc	own:		
Street Address	City	State Zip	
Telephone: Home	Cell	Work	
Desired Position:			
Employment desired: Full Time	Part Time	Temporary/Seasonal	
Date available to begin work:		_	
Do you have a current CLD drivers licer			
Have you been convicted of, or served (In accordance with policy, this information If "yes", please list incident, city/state	n will be reviewed for job re	elatedness and time since last conviction.)	_
Please review the job description for the perform the essential function of ea If "No", please explain by position title	ich of the positions you li	isted:Yes No	able
If you are under 18 years of age, can yo	ou provide required work	k authorization? Yes No	
Are you legally eligible to work in the L employment? Yes No	Jnited States and able to	provide required documentation upo	on

Have you ever had any job-related training in the United States military? _____ Yes _____ No If "Yes", please describe training, give dates, branch of military and any other information you feel would be helpful: ______

Have you ever been employed by Soldier Township	before? Yes	s No If "Yes", complete the
following: Dates Employed:	Position(s) Held:	
Reason for Leaving:		

EDUCATION

	Name and Location of School	Course of Study	# Of Years Completed	Diploma, Certificate or Degree Received or Credit Hours Completed
High				
School				
College				
or University				
Vocational or				
Trade School				
Graduate				
School				

WORK HISTORY

Start with your present or most recent employment and provide ALL information requested.

Jame of Employer:		Phone Number:	
Complete Address (including street, city, state & zip)		Supervisor's name, title & phone number:	
From (Month/Day/Year)	From (Month/Day/Year) To (Month/Day/Year)		Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each:			

Name of Employer:		Phone Number:	
Name of Employer:		Flione Number.	
Complete Address (includi	ng street, city, state & zip)	Supervisor's name, title & phone number:	
	1		1
From (Month/Day/Year)	To (Month/Day/Year)	Starting Salary:	Ending Salary:
C_{i} (a) of a (b)		 	l .
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Name of Employer:		Phone Number:	
Complete Address (including street, city, state & zip)		Supervisor's name, title & phone number:	
From (Month/Day/Year) To (Month/Day/Year)		Starting Salary:	Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each:			

Do you authorize inquiry about you from your present employer? _____ Yes _____ No If "No", please explain: _____

What is your desired salary range or minimum salary requirements?

List any special certifications, courses, training, seminars, or military experience that would enable you to perform the duties of the position for which you are applying:

CERTIFICATION AND RELEASE

This application form is intended for use in evaluation of your gualifications for employment. This is not an employment contract. Please answer all appropriate questions completely and accurately. False or misleading statements during the interview and on this form are grounds for terminating the application process or, if discovered after employment, terminating employment. All gualified applicants will receive consideration without discrimination because of sex, marital status, race, age, creed, national origin, or the presence of disabilities. A felony conviction will not necessarily bar an applicant from employment. Additional testing of job-related skills and for the presence of drugs in your body may be required prior to employment. After an offer of employment, and prior to reporting to work, you are required to submit to a medical review. Depending on company policy and the needs of the job, you will be required to complete a medical history form and may be required to be examined by a medical professional designated by the company. I certify that I have read and understand the application note and that the answers given by me to the foregoing questions and the statements made by me are complete and true to the best of my knowledge and belief. I understand that any false information, omissions, or misrepresentations of facts called for in this application may result in rejection of my application or discharge at any time during my employment. I authorize the company and/or its agents, including consumer reporting bureaus, to verify this information. I authorize all former employers, persons, schools, companies, and law enforcement authorities to release any information concerning my background and hereby release any said persons, schools, companies, and law enforcement authorities from any liability for any damage whatsoever for issuing this information. I also understand that the use of illegal drugs is prohibited during employment. If company policy requires, I am willing to submit to drug testing to detect the use of illegal drugs prior to and during employment.

Signature of Applicant

Date

Soldier Township

Candidate Reference Check Form Candidate – Please complete the top 5 lines only.

REFERENCES MAY NOT BE RELATIVES

Date:			
Candidate's Name:			
Reference Name:	Phone #:		
Reference's Current Position:			
Reference's Past/Present Relationship with Candidate:			
Everything below this line to be completed by a So	bldier Township staff member.		
Strength areas of Candidate:			
Improvement areas for Candidate:			
Candidate's success in the following areas: (Rank 1-5; 1 = Low / 5 = High)			
Accuracy and detail orientation Follow-throug	h		
Technical knowledge Achieving goals			
Work Ethic Attendance			
Would you hire this candidate to work for/with you again?			
How is this candidate perceived by subordinates/peers/managers?			
What other aspects of the candidate's work record should we understand to best manage this candidate?			

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