

FOR OFFICE USE ONLY	
Possible Work Locations	Possible Positions

# CITY OF BIG RAPIDS APPLICATION FOR EMPLOYMENT

TO APPLICANT: We deeply appreciate your interest in the City of Big Rapids. Thank you for taking the time to complete this application. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits other types of discrimination such as age, citizenship, disability, veteran status, attainment of benefits, and participation in union activities. The laws of most states and many localities also prohibit some or all of the above types of discrimination, as well as some additional types including, but not limited to, discrimination based upon ancestry, marital status, parental status, sexual orientation, or source of income. The Fair Credit Reporting Act imposes restrictions with respect to information obtained from a consumer reporting agency, including but not limited to information regarding credit data, personal character, general reputation and mode of living. This list, however, is not exhaustive of the grounds on which discrimination is prohibited.

(PLEASE PRINT PLAINLY)

DATE: \_\_\_\_\_

## PERSONAL

Name \_\_\_\_\_  
Last First Middle

Social Security No. \_\_\_\_\_ Telephone No. \_\_\_\_\_

Address \_\_\_\_\_  
No. Street City State Zip

Are you legally eligible for employment in the U.S.A.? Yes \_\_\_ No \_\_\_ If hired, you are required to submit proof of your eligibility to work in the U.S.A.

Position(s) applied for \_\_\_\_\_

Please list any job related experiences, skills, licenses or qualifications which will be of special benefit in the job for which you are applying? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please provide any military service information: Branch \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_ Training/experience received; \_\_\_\_\_

Were you previously employed by us? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

If your application is considered favorably, on what date will you be available for work?  
 \_\_\_\_\_

Is there any information we need to know about your name, for us to be able to check your work record? Yes \_\_\_ No \_\_\_ Please specify: \_\_\_\_\_  
 \_\_\_\_\_

Are you over the age of 18? [ ] Yes [ ] No If no, hire is subject to verification that you are of minimum legal age.

How were you referred to our organization? \_\_\_\_\_

## EMPLOYMENT HISTORY

(List below present and past employment, beginning with your most recent)

I

Name and Address of Company And Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

II

Name and Address of Company And Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

III

Name and Address of Company And Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

IV

Name and Address of Company And Type of Business	From		To		Weekly Starting Salary	Weekly Last Salary	Reason for Leaving	Name of Supervisor
	Mo.	Yr.	Mo.	Yr.				
	Describe the work you did:							
Telephone								

I hereby give permission to contact the preceding listed employers concerning my prior work experience as indicated below.

Employer I?    Yes \_\_\_ No \_\_\_  
 Employer II?    Yes \_\_\_ No \_\_\_  
 Employer III?    Yes \_\_\_ No \_\_\_  
 Employer IV?    Yes \_\_\_ No \_\_\_

\_\_\_\_\_  
Signed

## RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Circle Last Year Completed				Did You Graduate ?	List Diploma Or Degree
Elementary		X	5	6	7	8	[ ] Yes [ ] No	X
High			1	2	3	4	[ ] Yes [ ] No	
College			1	2	3	4	[ ] Yes [ ] No	
Other (Specify)			1	2	3	4	[ ] Yes [ ] No	

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### PERSONAL REFERENCES (Do Not Include Former Employers or Relatives)

Name and Occupation	Address	Phone Number

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May we telephone you to follow up on this application at home? Yes \_\_\_\_ No \_\_\_\_

If yes, what is the best time to call? \_\_\_\_\_

May we telephone you to follow up on this application at work? Yes \_\_\_\_ No \_\_\_\_

If yes, what is the best time to call? \_\_\_\_\_

What is your business telephone number? \_\_\_\_\_

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Do you have any relatives who are employed by the City of Big Rapids: [ ] Yes [ ] No

Please Specify: \_\_\_\_\_

**CITY'S NEPOTISM POLICY: IMMEDIATE FAMILY RELATIONS OF THE MAYOR, COMMISSIONERS, OR CITY MANAGER CURRENTLY IN OFFICE SHALL NOT BE HIRED BY THE CITY. EMPLOYMENT SHALL NOT RESULT IN ONE IMMEDIATE FAMILY MEMBER SUPERVISING ANOTHER.**

**PLEASE READ AND SIGN BELOW**

PURSUANT TO MICHIGAN LAW: I hereby waive my right to written notice by my present and/or former employers whenever a disciplinary report, letter or reprimand, or other disciplinary action regarding me is divulged to you by present or former employers.

Yes     No

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Signature of Applicant

**APPLICANT'S STATEMENT**

**PLEASE READ AND SIGN BELOW**

I understand that the employer follows an "employment at will" policy, in that I or the employer may terminate my employment at any time, or for any reason consistent with applicable state or federal law; this "employment at will" policy cannot be changed verbally or in writing, unless the change is specifically authorized in writing by the chief operating officer of this organization. I understand that this application is not a contract of employment. I understand that federal law prohibits the employment of unauthorized aliens; all persons hired must submit satisfactory proof of employment authorization and identity; failure to submit such proof will result in denial of employment.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers, and in interviews. I authorize all individuals, schools, and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient cause for dismissal or refusal of employment.

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Signature of Applicant

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