

## Hillage of Addyston... INCORPORATED



ON THE NATIONAL REGISTER OF HISTORIC PLACES PHONE (513) 941-1060 FAX (513) 941-0740 ADDYSTON, OHIO 45001-0536

## **Employment Application**

		App	licant Ir	ıforma	ation			
Full Name:	Last	Firs	t gg	32		M.I.	Date:	
Address:	Street Address						Apartment/Unit #	
	City					State	ZIP Code	
Phone:	•		E	Email				
Date Availal	Date Available: Social Security No*.: Desired Salary:							
Position App	olied for:							
YES NO YES NO Are you a citizen of the United States? ☐ ☐ If no, are you authorized to work in the U.S.? ☐ ☐								
Have you e	ver worked for this depa	YES Introduction	NO	If yes,	when?_			
Have you e	ver been convicted of a	YES felony?	NO					
If yes, expla	iin:							
THE REAL PROPERTY.			Educa	ation				
High Schoo	l:		Address:					
From:	To:	Did you g	raduate?	YES	NO	Diploma::		
College:			Address:_					
From:	To:	Did you g	raduate?	YES	МО	Degree:		
Other: Address:								
From:	To:	Did you g	raduate?	YES	NO	Degree:		

NEW YORK OF THE PARTY OF THE PA	Refer	ences	<b>到</b> 现在,然后	SULT RESERVE THE SECOND SECOND	
Please list three professional refere	ences.				
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Addana					
	Previous E	mplovme	ent		and the
Company:			1190	Phone:	
				Supervisor:	
Job Title:		alary:\$		V/	
Responsibilities:					
From: To:_		Reason fo	or Leaving		
May we contact your previous superv	risor for a reference?	YES	NO		
Company:	3 35			Dhana	
Company:Address:				Phone:Supervisor:	
30 N					
Job Title:	Starting Sa	alary: <u>\$</u>		Ending Salary:	
Responsibilities:					
From: To:		Reason fo	or Leaving:		
Company:		2180		Phone:	
				Supervisor:	
Job Title:	Starting Sa	alary:\$		Ending Salary:\$	

Responsibilities:						
From: To	·	Reason for Le	eaving:			
May we contact your previous supe	ervisor for a reference?		NO			
E MONTH SERVICE	Military	Service		r a the sa	19900	
Branch:			From:	To:		
Rank at Discharge:		Type of Disc	charge:			
If other than honorable, explain:						
Licenses / Certifications issued by:	Certifications, Licen Your Specializati		trations License / Certificatio	n Number E	Expires	
Who referred you to the Village of A	MANAGER SEEDING SEEDING SEEDING					
Have you applied with the Village of					11.5	
Are you at least 18 years of age? Yes No						
Are you willing to work any shift, including nights and weekends? Yes No If No, please state any limitations:						
If applicable, are you available to w	ork overtime?	Yes	No			
If you are offered employment, when would you be available to begin work?						
Are you able to perform essential functions of the job position with or without reasonable accommodations?						
YesNo / Wha	at reasonable accommoda	ations, if any wo	ould you require?			
Have you ever been convicted of a	ny crime, including traffic	violations?	Yes	_No / If Yes, ¡	olease	
describe:						
THE EXISTENCE OF A CRIMINA UNLESS RELEVANT TO THE TYPE		CONSTITUTE	AN AUTOMATIC BA	R TO EMPLO	YMENT	
geographic will be a second	Applican	t's Skills_				

If No,	please state any limitations:					
If applicable, are you available to work overtime?YesNo						
If you	are offered employment, when would you be avai	lable to begin work?				
	ou able to perform essential functions of the job po					
	YesNo / What reasonable accom	modations, if any would you require? _				
Have you ever been convicted of any crime, including traffic violations?YesNo / If Yes, please						
descri	be:					
UNLE		icant's Skills				
years	those skills that you have. List any other skills the of experience and circle the number which corres while five represents exceptional ability)	at may be useful for the job you are se bonds to your ability for each particular	eking. Enter the number of skill. (One represents poor			
Skill		Years of Experience	Ability Or Rating			
[ ]	RCIC	<u>·</u>	12345			
[]	Microsoft Office Suite (Word, Excel, etc.)		12345			
[]	Accounting / Bookkeeping		12345			
[]	Customer Service	· · · · · · · · · · · · · · · · · · ·	12345			
[]	Communications		12345			
[]	Supervision		12345			
[]	Administrative		12345			
[]			12345			

## Disclaimer and Signature

## SOCIAL SECURITY NUMBER NOTICE\*

Social Security Numbers (SSNs) are used to match individuals with their application file. Disclosure of your SSN is voluntary, however a nine-digit number is necessary to process your application. Upon appointment and pursuant to Section 5101.321 of the Ohio Revised Code and other laws and regulations, a request for a SSN is mandatory. Your SSN may be used for purposes including but not limited to the following: Identification of obligators under child support orders, detection of welfare fraud, processing background checks and tax information or general employee identification.

I certify that my answers are true and complete to the best of my knowledge. I understand that providing false or misleading information will be the basis for rejection of my application, or if employment commences, immediate termination.

I authorize The Village of Addyston to contact former employers and educational organizations regarding my employment and education. I authorize my former employers and educational organizations to fully and freely communicate information regarding my previous employment, attendance and grades. I authorize those persons designated as references to fully and freely communicate information regarding my previous employment and education.

If this application leads to employment, I understand that false or misleading informatinterview may result in my release.	ation in my application or
I HAVE CAREFULLY READ THE ABOVE CERTIFICATION AND I UNDERSTAND	AND AGREE TO ITS TERMS.
Signature:	Date: