

EMPLOYMENT APPLICATION

14100 Civic Park Drive Riverview, MI 48193 Attention: Human Resources www.cityofriverview.com

Applicants for all positions are considered without regard to religion, race, color, national origin, age, gender, height, weight, disability, marital or veteran status or any other legally protected status.

Position applied for:		Date:			
Name:					
Last		First	Middle		
Address:					
Street					
City		State	Zip Code		
Telephone:					
Home		Cell	e-mail address		
Have you ever filed an application with	the City before?		Yes	No	
If yes, give approximate date.					
Have you been employed with the City	Yes	No			
If yes, give dates.					
Are you available to work:					
•	Tamananan.	# of house new wools			
Full-time Part-time	Temporary	# of hours per week:			
May your present employer be contact	ed?		Yes	No	
Are you 18 years of age or older? Yes No					
Can you provide proof of eligibility for employment in the USA? (Proof of citizenship or immigration status will be required upon employment.)					
On what date are you available for wor					
•			Yes	No	
Do you have a valid driver's license?	01-1-		162	INO	
License Number:	State:				
List the names of any relatives who are City Council Members, appointees or employees of the City and your relationship to them.					
Have you been convicted of a misdem	eanor or felony?		Yes	No	
Do you have felony charges pending against you?			Yes	No	
If you answered yes to either of the above questions, please provide dates, places, charges and disposition of <u>all</u> convictions.					

Education and Training

Are you a High School Graduate?	Yes	No		

Schools attended beyond High School	Location (State)	Courses or Major Studies	Dates of Attendance	# of Credits Completed	Grade Average	Degree or Certificate Type Year
Describe any specialized training, apprenticeships, skills, languages, extracurricular activities or honors.						
List any professional or trade licenses or certifications.						
Specialized Skills						
Google Chrome Powerpoint Other skills: Publisher				MS Word Excel BS&A Access		Excel Access
Please list heavy/light equipment, motor vehicles and other equipment operated.						
Do you have a valid CDL (Commercial Driver's License)? Yes No						
List professional, trade, business or civic activities and office(s) held. You may exclude memberships that reveal gender, race, religion, national origin, age, weight, marital status, disability or other protected status.						
Summarize special job-related skills and qualifications acquired from employment or other experience.						
Military Service Record						
Have you had any experience in the Armed Forces of the United States or in the National Guard? Yes No						
If yes, what bra	anch?		Rank at disc	charge:		
Type of discha	_		Date of disc	_		
Are you in the	re you in the reserves? Yes No If yes, date obligation ends:					
Describe any job-related training received in the United States Military.						

Employment History					
Note: The employment history section must be completed even if a resume is attached. List most recent employment first; include all positions with each employer.					
Employer Name:	Title/Position:				
Address:	Type of business:				
	Full-time Part-time				
Telephone Number:	Supervisor's Name:				
Dates employed:	Final salary/hourly rate:				
Reason for leaving:					
Duties:					
Employer Name:	Title/Position:				
Address:	Type of business:				
	Full-time Part-time				
Telephone Number:	Supervisor's Name:				
Dates employed:	Final salary/hourly rate:				
Reason for leaving: Duties:					
	T				
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	Full-time Part-time				
Telephone Number:	Supervisor's Name:				
Dates employed:	Final salary/hourly rate:				
Reason for leaving:					
Duties:					
Have you ever been dismissed from or asked to resign for the lifyes, please explain:	rom any employment position? Yes No				

References				
Please list three persons who have knowledge of your experience and qualifications for this position, preferably current or previous supervisors, co-workers, instructors, etc. Do not include relatives. If you are known to your references by another name, please note.				
Name:	Relationship:			
Address:	Telephone:			
	Years Acquainted:			
Name:	Relationship:			
Address:	Telephone:			
Address.	Years Acquainted:			
Name:	Relationship:			
Address:	Telephone:			
7.144.10001	Years Acquainted:			
APPLICANT STATEMENT 1) I certify that answers given herein are true and complete to the best of my knowledge. I understand that failure to complete this application accurately and in its entirety will be cause for the City of Riverview to disqualify my application. 2) I authorize the City to perform all checks of my credentials as allowed by law including but not limited to criminal background investigations, driver's license record, drug and alcohol tests, and discussions with supervisors, co-workers, friends, business associates or other individuals that the City, in its sole discretion, believes may have relevant information regarding my suitability for employment. I agree not to assert any claims or causes of action of any kind against the City, its agents, its employees or any individual contacted by the City, arising out of the City's investigation. I also waive any right under the Bulland-Plawecki Right to Know Act, 1978 PA 397, to receive written notice from the City or any former or current employer that disciplinary reports, letters of reprimand, or other disciplinary action taken against me while employed, will be or have been disclosed to a third person or entity. I further release and forever discharge the City, its agents, its employees and the individuals and companies contacted by the City as part of its investigation, from any and all claims, demands, damages, actions, causes of action or suits of any kind or nature whatsoever arising from the City's investigation of my credentials. I acknowledge that the City has made no representations of any kind as to whether employment will be offered at the conclusion of its investigation. 3) This application for employment shall be considered active until the position is filled but in no event will exceed 180 days. Any applicant wishing to be considered for employment will be offered at the conclusion of its investigation or any portion herein. 4) I hereby understand and acknowledge that, unless specifically and clearly defined by applicable law, con				
7) I agree not to commence any action or suit relating to my employment or the City's failure to offer me employment, more than six months after the date of termination of such employment or, if not hired, within six months of the date of the application, and to waive any statute of limitations to the contrary, unless such statute of limitations provides a shorter period of time in which to bring a claim or cause of action.				
8) I understand, acknowledge and hereby consent to each of the above statements and conditions. Sign this application electronically. Example: /s/ John C. Smith				
Signature:	Date:			

How did you hear about us?