



APPLICATION FOR EMPLOYMENT

Colerain Township considers applications without regard to race, color, religion, creed, sex, national origin, disability, sexual orientation, citizenship status or any other legally protected status.

APPLICANT INFORMATION				
Position applying for:			Date of application:	
Last name:		First name:		Middle:
Address:				
City:		State:		Zip:
Phone #:		Email:		SSN:
Have you ever filed an application for employment with us?			___ Yes ___ No	If yes, date:
Have you ever been employed by Colerain Township?			___ Yes ___ No	
Do you have any friends or relatives who work here?			___ Yes ___ No	
If yes, state name and relationship:				
How did you learn about us?				
Are you currently employed?			___ Yes ___ No	
May we contact your current employer?			___ Yes ___ No	
Date available to begin work:		Expected salary:		Full time: ___ Part time: ___
EDUCATION				
	Name	Address	Years Attended	Diploma/Degree
High School:				
College:				
Other:				
EMPLOYMENT INFORMATION				
Employer:			Dates of employment:	
Address			Supervisor:	
Work performed:				
Title:		Starting salary:		Ending salary:



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Employer:		Dates of employment:	
Address		Supervisor:	
Work performed:			
Title:	Starting salary:	Ending salary:	
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Address		Supervisor:	
Work performed:			
Title:	Starting salary:	Ending salary:	
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Address		Supervisor:	
Work performed:			
Title:	Starting salary:	Ending salary:	

REFERENCES

	Name	Phone	Best time to call	Occupation
1.				
2.				
3.				

APPLICANT'S STATEMENT

Please be advised that all information supplied on this application is subject to verification. Be fully truthful and do not evade questions. The Ohio Revised Code provides penalties for making a false statement of a material fact or for practicing fraud or deception in obtaining or attempting to obtain public employment. Such penalties include rejection for appointment or discharge after appointment and/or prosecution.

I certify that the answers provided in the employment application are true and complete. I authorize the investigation of all statements in this employment application. In the event of employment, I understand that false or misleading information given in my application and interviews may result in discharge. I also understand that I am required to abide by all rules and regulations of Colerain Township.

Signature:

Date: