Filing Information

Date Received

Month: _____ Day: _____ Year:_____

Time:_____

Received By:_____

Applicant: Do not write in this space

APPLICATION FOR EMPLOYMENT

Village of Minerva

209 N. Market St.
Minerva, OH 44657
Phone: 330-868-7705

www.minerva.oh.us

(PLEASE PRINT CLEARLY)

Applicants requiring reasonable accommodation with the application and/or interview process, please notify the Village Administrator at Minerva City Hall, 209 N. Market St., Minerva, Ohio 44657, or by phone at (330) 868-7705.

The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex, or national origin.

The Age Discrimination Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years of age.

The Americans with Disabilities Act prohibits discrimination on the basis of a disability.

DO NOT USE "SEE RESUME" IN LIEU OF COMPLETING THIS APPLICATION. RESUME AND COVER LETTER MAY BE INCLUDED.

The Village of Minerva may refuse employment consideration if the application is not filled out completely and accurately. Please submit one application per position. Note that this application form will become public record upon submission to the Village of Minerva. Applications are filed according to specific job openings.

This application should be completed for current openings only.
Non-solicited applications are not accepted.

Applicant Information

Full Name: _____ Date:_____
Last *First* *M.I.*

Address: _____
Street Address *Apartment/Unit #*

_____
City *State* *ZIP Code*

Phone: _____ Email_____

Date Available: _____ Last 4 of Social Security No.:_____ Full Time / Part Time / Seasonal:_____

Position Applied for: _____

Are you a citizen of the United States? YES ☐ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

Were you previously employed by the Village of Minerva? YES ☐ NO ☐ When and what positions?_____

Have you ever been employed by another Government Agency in the State of Ohio? YES ☐ NO ☐ If Yes, When? _____ Agency/Job Title: _____

Are you over the age of 21? (21 is the minimum age for operating a city vehicle which is not required by all positions) YES ☐ NO ☐

Do you possess a valid Ohio Drivers License? YES ☐ NO ☐ Drivers License Number: _____

Have you ever been convicted of a felony? YES ☐ NO ☐

If yes, explain: _____

Military Service

Were you in the Armed Forces? _____ Yes: _____ No: _____

Branch: _____ From: _____ To: _____

List Duties / Special Training _____

I am requesting bonus credit for Military Service. (Must attach DD-214) Yes: _____ No: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Work Experience

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: **$** _____ Ending Salary: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your current / previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: **$** _____ Ending Salary: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: **$** _____ Ending Salary: **$** _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES ☐ NO ☐

Education

High School / GED: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Other: _____ Address:

From: _____ To: _____ Did you graduate? YES ☐ NO ☐ Degree: _____

Certifications, Licenses & Other

Valid Driver's License	YES ☐	NO ☐	*Date Received:* _____
CDL (Class A or B)	YES ☐	NO ☐	*Date Received:* _____
Heavy Equipment Operator Cert.	YES ☐	NO ☐	*Date Received:* _____
OSHA 10 - Construction Training	YES ☐	NO ☐	*Date Received:* _____
OSHA 30 - Safety Training	YES ☐	NO☐	*Date Received:* _____
Traffic Control/ Flagger Cert.	YES ☐	NO ☐	*Date Received:* _____
Pesticide Applicator	YES ☐	NO ☐	*Date Received:* _____
Journeyman Licenses	YES ☐	NO ☐	*Date Received:* _____

(Electrican, Plumber, HVAC, Welding)

CPR	YES ☐	NO ☐	*Expiration Date:*
First Aid	YES ☐	NO ☐	*Expiration Date:*
Lifeguarding Cert	YES ☐	NO ☐	*Expiration Date:*
Microsoft Office Specialist	YES ☐	NO ☐	*Expiration Date:*
Other:			*Expiration Date:*

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Applicant Certification and Agreement

PLEASE READ CAREFULLY BEFORE SIGNING

The facts set forth above in my application are true and complete. I understand that if employed, or considered for employment, false statements or omissions on this application or during the hiring process shall be considered sufficient cause for removal. You are hereby authorized to make any investigation of my personal history, criminal background, and financial and credit record (if applicable) through any investigative or credit agencies or bureaus of your choice.

In making this application I also understand that information may be obtained through personal interviews with my neighbors, friends or others with whom I am acquainted. This includes information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to submit a written clarification of any adverse or incorrect information in my application file.

I do herby understand and agree that:

1. *Any material misrepresentation or deliberate omission of a fact in my application may be justification for refusal of or, if employed, termination from employment.*
2. *It is my understanding that the Village will make a thorough investigation of my entire work and personal history and may verify all data given in my application for employment, related papers, or oral interviews. I authorize such investigation and the giving and receiving of any information requested by the Village and I release from liability any person giving or receiving any such information. I understand that falsification of data so given or other derogatory information discovered as a result of this investigation may prevent my being hired or, if hired, may subject me to immediate dismissal.*
3. *I authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the duties of a job that I am hereafter conditionally offered or, in the future, during my employment with the Village.*
4. *I understand and agree that I will be required to take and pass a drug test as a condition of hiring and/or continued employment. (Drug testing includes pre-employment, random, for cause and post-accident). I agree to consent to take such test(s) at such time as designated by the Village and to release to the Village, its agents, officers or employees from any claim arising in connection with the use of such test(s).*
5. *Although management makes every effort to accommodate individual preferences, business needs may, at times, make the following conditions mandatory: overtime, shift work, or a rotating work schedule other than Monday through Friday. I understand and accept these as conditions of any employment with the Village of Minerva.*
6. *I am aware that this application is a "Public Record" and will be handled in accordance with Ohio Public Records Law.*
7. *I understand that this is an application for employment and that no employment contract is being offered.*

I certify that my answers are true and complete to the best of my knowledge and I have read and understand the above.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____