## CRYSTAL TOWNSHIP APPLICATION FOR EMPLOYMENT

PERSONAL INFORM	ATION	DATE OF APPLICATION:				
Name:						
	Last	First	Middle			
Address:						
	Street	(Apt)	City, St	ate Zip		
Contact Information:	( ) Home Telephone		( ) Mobile	Email		
	·					
Are you 18 years old or o	older? Yes No - 1	Have you ev	er been convicted of a	crime? Yes No		
Are there any felony cha	rges pending against you	ı? Yes N	No			
POSITION SOUGHT: Temporary Part time employee for Crystal Township DPW  Available Start Date:  Are you currently employed?						
EDUCATION	Name and Location	on	Graduate? - Degree?	Major / Subjects of Study		
High School						
College or University						
Specialized Training, Trade School, etc						
Other Education						
Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.						

## **PREVIOUS EXPERIENCE**

Please list most recent/current employment first

Dates Employed	Company Name	Location	Role/Title			
Job notes, tasks perform	ed and reason for leaving:	<u> </u>				
Dates Employed	Company Name	Location	Role/Title			
Job notes, tasks performed and reason for leaving:						
Dates Employed	Company Name	Location	Role/Title			
Job notes, tasks perform	ed and reason for leaving:					
Completed applications must be returned by December 8, 2023 5 PM to: Pat Baker-Marek, Clerk - mailed to: Crystal Township PO Box 358 Crystal, MI 48818 or email: <a href="mailto:clerk@crystalmi.com">clerk@crystalmi.com</a> . Questions contact C McCracken at 989-235-4134.						