

Mantua Township  
11741 Mantua Center Road  
Mantua, Ohio 44255

APPLICATION FOR EMPLOYMENT

PERSONAL INFORMATION

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Present address \_\_\_\_\_  
Number Street City State Zip

Telephone ( ) \_\_\_\_\_

E-mail \_\_\_\_\_

EMPLOYMENT DESIRED

Position(s) applied for \_\_\_\_\_

Employment desired      → FULL-TIME ONLY    → PART-TIME ONLY

When are you available to start work?

EDUCATION

TYPE OF SCHOOL	NAME OF SCHOOL & LOCATION	QUALIFICATION OBTAINED	MAJOR & SPECIALISATION	NUMBER OF YEARS COMPLETED
High School				
College/ university				
Professional or Graduate School				

## WORK EXPERIENCE

Please list your work experience for the past ten years beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

<b>Name of Employer</b>  <b>Address</b>  <b>City, State, Zip</b>  <b>Phone number</b>	<b>Name of last supervisor</b>	<b>Employment dates</b>	<b>Pay or salary</b>
		<b>From</b> <b>To</b>	<b>Start</b> <b>Final</b>
	<b>Your last job title</b>		
<b>Reason for leaving (be specific)</b>			
<b>List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.</b>			

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<b>Phone number</b>		<b>To</b>	<b>Final</b>
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<b>Are you currently employed?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>May we contact your present employer?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Did you complete this application yourself?</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>If not, who did?</b> _____		

**Have you ever been convicted of a felony?** → Yes      → No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. \_\_\_\_\_

**Have you ever been employed with Mantua Township?** → Yes      → No

If yes, when? \_\_\_\_\_

**Do you have any friends or relatives employed by Mantua Township?** → Yes      → No

If yes, please provide their names and relationship to you. \_\_\_\_\_

**REFERENCES**

Please list below three persons not related to you who have knowledge of your work performance and/or personal qualifications within the last 5 years.

Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted
Name		Occupation
Company name	Address	
Telephone	E-mail	Years acquainted

**APPLICATION FORM WAIVER – PLEASE READ CAREFULLY**

In exchange for the consideration of the job application by Mantua Township, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Mantua Township practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Mantua Township, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Trustees of Mantua Township. Both the undersigned and Mantua Township may end the employment relationship at any time, without specified notice or reason. If employed, I understand that Mantua Township may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give Mantua Township permission to contact schools, previous employers { unless otherwise indicated }, references, and others, and hereby release Mantua Township from any liability as a result of such contract.

I also understand that {1} Mantua Township has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; {2} consent to and compliance with such policy is as condition of my employment; and {3} continued employment is based on the successful passing of testing under such policy.

I understand that, in connection with the routine processing of your employment application, Mantua Township may request from a consumer reporting agency an investigative consumer report including information as to my credit records, character, general reputation, personal characteristics, and mode of living. Upon written request from me, Mantua Township, will provide me with additional information concerning the nature and scope of any such report requested by it.

I further understand that my employment with Mantua Township shall be probationary for a period of ninety {90} days, and further that at any time during the probationary period or thereafter, my employment relation with Mantua Township is terminable at will for any reason by either party.

Signature \_\_\_\_\_ Date \_\_\_\_\_