## APPLICATION FOR EMPLOYMENT

15185 Algoma Avenue Cedar Springs, MI 49319 Office: 616-696-1718 Fax: 616-696-3970

Middle Name

Today's Date

Solon Township is an Equal Opportunity Employer, dedicated to a policy of nondiscrimination in employment matters on the basis of race, creed, color, age, marital status, national origin, sex, or status with regard to public assistance or disability.

First Name

**Personal Information** 

Last Name

Street Address City	State	Zi	p Code				
Work Phone: ()	Are you a United States Citizen or legally eligible to work in the U. S.?						
Are you 18 or over?YesNo							
Title of Position Applying For	Date Available	Date Available to Work					
Have you been previously interviewed or employed by Solon Township?YesNo If Yes, list date(s) and job title(s):  Do you have any relatives currently working for Solon Township?YesNo If Yes, list names and relationship to you:							
Are you employed now?	If so, may we contact yo	our present employer?					
Education							
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma				
High School	n Tears completed	Major Area or Study	Degreed Diploma				
College							
Graduate School							
Technical or Certificate Programs							

<b>Employment History</b>	Please provide the following information for your previous three employers, beginning with the most recent: (Please attach an additional page if necessary, do not use "see attached resume".)				
Employer:	Dates Employed:		Job Title:		
	From	To			
Address:					
Telephone:		Job Duties:			
Weekly Pay Start: Finish:					
Reason for Leaving:					
Powl	Durie	1.	L.I. T.I.		
Employer:	Prom	1: To	Job Title:		
Address:					
Telephone:		Job Duties:			
Weekly Pay Start:	Veekly Pay Start: Finish:				
Reason for Leaving:					
Employer:	Dates Employed	d:	Job Title:		
	From	To			
Address:			,		
Telephone:		Job Duties:			
Weekly Pay Start:	Finish:				
Reason for Leaving:					
Oper Charles					
Office Skills (copying, filing,	spreadsheets, softw	vare, hardware):			

Describe your quetc.)	ualifications for the type of	employment you are see	king: (Please include skills, special	training,	
Please list any sp	pecial awards, honors, schol	arships, or offices held.			
References	Please list names of su	pervisors, managers, or oth	ners who can comment directly on you	r abilities:	
Name	Address	Phone #	Relationship/Occupation	Years Known	
(Having conviction of the conv	etions will not necessarily proxplain when and the nature only pending criminal charges	reclude you from obtaini of the offense.	n felony and misdemeanor convicting employment.)	ons	
ir yes, prease es					
understand that		nts on this application sh	re true and complete to the best of all be considered sufficient cause coes.		
	considered for employment b		eriod of time not to exceed 60 days should inquire as to whether or not		
with Solon Tov resign at any tir understood that	wnship, which is a general lame and the Employer may details "at will" employment:	aw township, is of an "at lischarge Employee at ar relationship may not be	d by applicable law, any employme will" nature, which means that the ty time with or without cause. It is changed by any written document outhorized executive of this organization.	Employee may further by conduct	
Signature of Applicant		t	Date	Date	