
Are you currently enrolled in an educational program? Yes No If yes, what is your main course of study and where are you attending? _____

LICENSES, CERTIFICATIONS, REGISTRATIONS

I possess: a valid Driver's License _____ a valid Commercial Driver's License _____

Please list State _____ Number: _____ Expiration Date: _____

PROFESSIONAL/TECHNICAL LICENSES AND REGISTRATIONS

TYPE	STATE	NUMBER	EXPIRATION DATE (IF ANY)

MILITARY SERVICE

Were you in the U.S. Armed Forces: Yes No If yes, what branch? _____

Dates of Services: From: _____ to _____ Rank: _____

Technical Specialization: _____

AWARDS, HONORS, ACHIEVEMENTS, INTERESTS

Please list any awards, honors, achievements, volunteer or community services activities, special interests, hobbies, or any organizations of which you are/have been a member. Please indicate any positions of leadership previously/currently held.

TRAINING AND OTHER QUALIFICATIONS

Please list any training you feel is relevant to the position for which you are applying:

SUBJECT AREA OF TRAINING	ORGANIZATION PROVIDING TRAINING	YEAR TRAINING RECEIVED

Please use this area to briefly describe any additional information or special qualifications you have for the position for which you are applying. Please be sure to include any special machinery, office equipment, software, tools, vehicles, or other job-related items.

EXPERIENCE

List your work experience starting with your current/most recent employer. Please include all employment whether full-time, part-time, seasonal, or temporary during the past ten years. You may include additional experience beyond the past ten years if you desire and you are encouraged to do so if it is related to the employment you are seeking. You may attach additional pages, if necessary. Please not use a resume as a substitute for completing this section; however, you may attach a resume to supplement the information contained within this employment application.

Current/Most Recent Employer: _____

Address: _____
Street City State Zip Code

Supervisor's Name: _____ Phone Number: (____) _____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

The Village of Golf Manor may contact former employers. If you prefer that we do not contact your present employer until such time as a conditional offer of employment is made, please check this block:

Previous Employer: _____

Address: _____
Street City State Zip Code

Supervisor's Name: _____ Phone Number:(_____)_____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

EXPERIENCE (continued)

Previous Employer: _____

Address: _____
Street City State Zip Code

Supervisor's Name: _____ Phone Number:(_____)_____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

Previous Employer: _____

Address: _____
Mailing Address City State Zip Code

Supervisor's Name: _____ Phone Number:(_____)_____

Position Held: _____ Salary: _____

Dates of Employment: _____ to _____ Type of Employment: Full-Time Part-Time Seasonal/Temporary

Description of duties and responsibilities:

Reason for Leaving:

REFERENCES

Please list three individuals, other than relatives, whom we may contact as references regarding your character, ability, or experience.

NAME	HOME PHONE NUMBER (WITH AREA CODE)	WORK PHONE NUMBER (WITH AREA CODE)	TYPE OF REFERENCE (PERSONAL, PROFESSIONAL, EDUCATIONAL, ETC.)

CERTIFICATION AND STATEMENT OF UNDERSTANDING

I certify that all information provided in this employment application and its addenda is true and complete to the best of my knowledge. I understand that the Village of Golf Manor may investigate this information and I understand that any misrepresentation or false information in this application and its addenda may lead to withdrawal of any employment offer or termination after employment.

Signature: _____ Date: _____

ACKNOWLEDGEMENT & RELEASE

(Please read thoroughly before signing.)

I hereby acknowledge that I, voluntarily and of my own free will, have applied for employment with the Village of Golf Manor with the understanding that the Village may use a variety of screening procedures to evaluate my qualifications and suitability for appointment. I have been advised that these screening procedures may include, but are not limited to, interviews, criminal record checks, driving record checks, polygraph examinations, written testing, reference checks, background investigations, psychological evaluations, medical examinations, and drug testing. I hereby understand that I would not be required to actually participate in a psychological evaluation, medical examination, or drug test until after I have received a conditional offer of employment. I also acknowledge that I may also be subject to other screening procedures, not specifically listed above. I further acknowledge that any such screening procedures, as reasonably required by the Village of Golf Manor, are a prerequisite to my appointment to a position with the Village of Golf Manor.

In addition, I also hereby understand that the Village of Golf Manor cannot guarantee the confidentiality of the results of, or information obtained through, the aforementioned screening procedures. Rulings of the Ohio Supreme Court relative to the Public Records Act indicate that, with certain enumerated exceptions, records maintained by a governmental entity are a matter of public record and, should a proper request be made by a member of the public for such records, the governmental entity would be required to make such records available to that member of the public within a reasonable period of time. Employment-related documents, with the exception of medical records, maintained by the Village relative to the aforementioned screening procedures do not appear to fall within any of the enumerated exceptions.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Village of Golf Manor is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time for any reason, except as otherwise determined by the Charter and Ordinances of the Village of Golf Manor or applicable law. It is further understood that this "at will" employment relationship may not be changed by any written document or contract unless such change is specifically acknowledged in writing by the authorized executive of the Village.

Therefore, in consideration of my employment application being reviewed and considered by the Village of Golf Manor I, being at least 18 years of age and under no legal disability on behalf of my heirs and assigns, hereby release and agree to hold harmless, the Village of Golf Manor and any of its agents, employees, or related officials from any and all liability, whatever the type and nature, resulting from the administration of any such screening procedures and/or the release of the results therefrom

Signature of Candidate:

Date:

Signature of Witness:

Date:

PRE-EMPLOYMENT DRUG TESTING CONSENT

I understand that, as a candidate for employment with the Village of Golf Manor, I must, in order to be appointed to a position with the Village of Golf Manor, voluntarily consent to, and pass, a drug screening to detect the presence of drugs in my system. I also understand that I will not actually be administered such a test until I have received a conditional offer of employment. I further understand that my application for employment will be rejected if I decline to sign this consent and thereby decline to be tested, if my test results are confirmed to be positive for the presence of illegal drugs or legal drugs for which I cannot submit sufficient proof that such drugs were legally obtained and used, or if masking agents are detected in any specimen I provide as part of the testing procedure.

I hereby knowingly and voluntarily consent to participate in a substance abuse screening and authorize the Village of Golf Manor to conduct, through its designated testing laboratory or other licensed/certified medical professionals/technicians, said screening. In addition, I authorize the designated testing laboratory or other licensed/certified medical professionals/technicians to release any and all information regarding the test(s), including results, to the Village of Golf Manor and its representative. I further release the Village of Golf Manor, its officers, directors, employees, agents, representatives from any and all claims, suits, causes of action, liability, and damages arising from my submitting to the test(s) and from the information obtained from the test(s).

Signature of Candidate:

Date:

Signature of Witness:

Date:

I refuse to consent to a drug screening.

Signature of Candidate:

Date:

Signature of Witness:

Date:

DRUG AND ALCOHOL TESTING

ACKNOWLEDGEMENT, RELEASE AND CONSENT

I acknowledge that the Village of Golf Manor has an Employee Drug Testing Program, which requires employees to submit to drug and/or alcohol testing under the following circumstances: when the Village has reasonable suspicion to believe that an employee is under the influence of illegal drugs or alcohol while on Village premises or on Village business; following a serious violation safety policies, rules, and regulations; or following a work-related accident resulting in any of the following: bodily injury (other than minor abrasions/contusions) to the employee or any third party requiring off-site medical attention; issuance of a traffic citation to the employee for a moving violation in connection with a vehicular accident; vehicular damage in apparent excess of \$1,000; non-vehicular property damage in apparent excess of \$500; any accident involving fatalities.

I understand that should I be appointed to a position with the Village of Golf Manor, the Village may request my participation in a drug and/or alcohol test one or more times during my employment with the Village. I further understand that I would be subject to appropriate disciplinary action including suspension or dismissal if the test results are positive, if masking agents are detected in specimens provided by me in conjunction with the testing procedure, or if I refused to be tested.

I hereby knowingly and voluntarily consent to further drug and/or alcohol testing after appointment to a position with the Village of Golf Manor, based upon the terms and conditions specified above, during the term of my employment with the Village of Golf Manor. I authorize the Village to conduct, through its designated testing laboratory or other licensed/certified medical professionals/ technicians, urinalysis, blood, saliva, or breath testing. In addition, I authorize the designated testing laboratory or other medical professionals/technicians to release any and all information regarding the tests, including their results, to the Village of Golf Manor and its representatives. I further release the Village of Golf Manor, its officers, directors, employees, agents, representatives from any and all claims, suites, causes of action, liability, and damages arising from my submitting to the tests and from the information obtained from the tests.

Signature of Candidate:

Date:

Signature of Witness:

Date:
