



**Madison Township
Franklin County**
Application for Employment
"An Equal Opportunity Employer"

(Please Print All Information)

Personal

Name: _____ SS# _____ - _____ - _____
Last First Middle

Address: _____
Number Street City State ZIP

Telephone Number: _____ Referred By: _____

Are you over 18 years of age? []Yes []No

Are you legally eligible for permanent employment in the United States? []Yes []No

Position(s) applied for _____

Full-Time Part-Time Other

Date you are available to start work? _____

Please indicate your qualifications, special skills and/or professional certifications: _____

Education

| Type of School | Name & Location | Course of Study | Years Attended | Did you Graduate |
|----------------|-----------------|-----------------|----------------|------------------|
| High School | | | | |
| College | | | | |
| Other | | | | |
| | | | | |

Are you employed at the present time: []Yes []No

Have you ever been bonded in prior employment: _____ If YES, list names(s) of employer(s):

Have you ever been convicted of a crime, excluding minor traffic offenses: _____ If YES, list convictions? (A conviction does not necessarily disqualify an applicant for this position)

Prior Employment (Start with most recent)

| | |
|---------------------------|-----------------------------------|
| Employer _____ | Phone: _____ |
| Address _____ | Supervisor: _____ |
| Street _____ | City _____ State _____ ZIP _____ |
| Position _____ | From/To _____ Salary/Wage\$ _____ |
| Reason for Leaving _____ | |
| Primary Job Duties: _____ | |

Prior Employment (Start with most recent)

| | |
|---------------------------|-----------------------------------|
| Employer _____ | Phone: _____ |
| Address _____ | Supervisor: _____ |
| Street _____ | City _____ State _____ ZIP _____ |
| Position _____ | From/To _____ Salary/Wage\$ _____ |
| Reason for Leaving _____ | |
| Primary Job Duties: _____ | |

Prior Employment (Start with most recent)

| | |
|--------------------------|-----------------------------------|
| Employer _____ | Phone: _____ |
| Address _____ | Supervisor: _____ |
| Street _____ | City _____ State _____ ZIP _____ |
| Position _____ | From/To _____ Salary/Wage\$ _____ |
| Reason for Leaving _____ | |
| Primary Job Duties _____ | |

Military Service

| |
|--|
| Branch of Service _____ |
| From/To _____ Rank _____ Date Discharged _____ |

*NOTE: Attach an additional sheet if necessary.

The above information is true and complete to the best of my knowledge. Should I be employed, any misrepresentation or false statement contained herein may be considered cause for possible dismissal. I give my permission to obtain all necessary information from references I may have listed, or any other sources, concerning my prior employment, personal history or credit standing, and I release all parties from any possible damages resulting from disclosing such information with or without prior written notice to me. I reserve the right to know the names and addresses of any investigative agencies used in order that I may learn the information contained in any reports furnished.

I understand this application does not constitute an employment contract of any kind. The application will remain active for one year. Should I be employed, I may resign such employment at any time at my discretion with or without, prior notice and my employment may be terminated at any time at the employer's discretion, with or without cause and with or without prior notice.

Date _____ Signature of Applicant _____