## **Employment Application City of Heath**

City of Heath
Return completed form to:
City of Heath
1287 Hebron Road
Heath, Ohio 43056
740/522.1420



City of Progress \* Citizens with Pride

Position applying for:	
Name:	
Last	Middle
Mailing Address: Street/Apt #	City/State/Zip
Are you a Heath resident? ☐ Yes ☐ No If yes	s, how long?
Telephone #: Home () Alter	nate: ()
Social Security Number:	_
Do you have legal authorization to work in the United States	s? □ Yes □ No
Do you have relatives currently employed by the City of Hea	ath? □ Yes □ No
If yes, who?	Relationship:
Do you have a valid Ohio Driver's License? $\square$ Yes $\square$ No	If yes, DL#
Have you ever been convicted of a crime for the violation of	any law except minor traffic violations?
☐ Yes ☐ No If yes, please explain:	
Have you had any traffic violations in the past four (4) years If yes, please explain:	
Military Sarvice Information	
Military Service Information  Type of Service:  Type of Service:	From: To:
Branch of Service: Type of Separation:	
Highest Rank AchievedJob T	Title:
Duties:	
Reserve or National Guard Status:	

## **Employment History**

Account for <u>all time</u> for the past ten (10) years, including periods of unemployment. You MUST indicate the name used if it is different than the signature on this application. Begin with your present position or occupation. If you need more room, use a separate sheet of paper. A resume is both welcomed and urged in addition to completion of this application. It will become an official part of this application.

A.	Company Name				
	Company Address				
	Supervisor's Name				
	Employment date from: month	year	to	month	_ year
	Salary: \$ per □	hour □ mont	ıth	□ year	
	Your Title:	Your Duties:			
	Reason for leaving:				
	May we contact: ☐ Yes ☐ No				
В.	Company Name				
	Company Address				
	Supervisor's Name				
	Employment date from: month	year	to	month	_ year
	Salary: \$ per □	hour ☐ mont	ıth	□ year	
	Your Title:	Your Duties:			
	Reason for leaving:				
	May we contact: ☐ Yes ☐ No				
C.	Company Name				
	Company Address				
	Supervisor's Name				
	Employment date from: month				_ year
	Salary: \$ per □	hour □ mont	ith	□ year	
	Your Title:	Your Duties:			
	Reason for leaving:				
	May we contact: ☐ Yes ☐ No				

D. Company Name					
Company Address					
Supervisor's Name					
Employment date from: month _	year_		to mont	h y	ear
Salary: <u>\$</u>	_ per □ hour	□ mon	th □ ye	ear	
Your Title:	Your	Duties:			
Reason for leaving:					
May we contact: ☐ Yes ☐ No					
<u>Education</u>					
Circle highest grade of school completed	d: 1 2 3 4	5 6 7	8 9 10	) 11 12 Pos	t Secondary
		Dates attended	Did you graduate? Yes or no	Course of Study	Degrees, credits earned, other awards
High School:					
Address:					
City, State, Zip					
College:					
Address:					
City, State, Zip					
College:					
Address:					
City, State, Zip					
Special Licenses  Current special licenses (i.e. boiler operation)  Ohio Commercial Driver's License:	ator, teacher,				
		•			

Name	Address	Te	Daytime Telephone Number		
1	Street Address		)		
	City, State, Zip				
2		,	,		
2.	Street Address		)		
	City, State, Zip				
3		(	)	_	
	Street Address				
	City, State, Zip				
ualifying nature or helpfu	knowledge, skills, and abilities not previou Il to you in establishing your eligibility. Ind ctivities, etc.	•		•	
ualifying nature or helpfuommunity or volunteer a	ıl to you in establishing your eligibility. Inc	elude any projec		•	
Malifying nature or helpfu ommunity or volunteer a san applicant for employ nake a thorough investigato, a motor vehicle operator	Il to you in establishing your eligibility. Inc	cument rstand and agre This may include on. I understan , your organizat	e that the Heion, or	he City mas not limite	
Attention: Read the follows an applicant for employable a thorough investigation, a motor vehicle operation liability or damages, was certify that all state	bwing statement before signing this do syment with the City of Heath, Ohio, I understand of my past employment and activities attoo/piercing policy. I hereby release you which may result from exchange of the information of my knowledge. I understand a standard and step of the best of my knowledge. I understand a	cument rstand and agre This may include on. I understan your organizate ormation reques	e that the Holion, or ted.	he City mass not limited leath Police others from ss are true	

References