

12060 Heath Street * P.O. Box 371 * Birch Run, MI 48415 * Office (989) 624-5711 * Fax (989) 624-9681

Employment Application

The Village of Birch Run is an equal opportunity employer and will not discriminate against any applicant on the basis of any characteristic that is protected by state or federal law. Michigan law requires that a person with a disability or handicap requiring accommodation to perform the essential duties of the job must notify the employer in writing within 182 days of the date that the need is known or should have been known. Federal law has no such requirement.

Applicant Information:

Level Marco			
Last Name	First Name	Middle Name	
Street Address	City	State Zip Code	
Home Phone	Cell Phone	Business Phone	
May we contact you during the da	ay? Yes	No	
Employment Information:			
Department Desired:	Administrative	Police	
	Public Works	Other	
Are you interested in:	Full-time Employment	Part-Time Employment	
	Temporary Employment	Un-Paid Employment	
Anticipated Salary: \$	/hr or yr	Date Available	
Referral Source Se	If Advertisement	Other:	
Have you ever been employed by	y the Village of Birch Run?	Yes No	
If Yes , please list Dates of Employment and Supervisor:			
Any family members currently employed by the Village of Birch Run?			
	ipioyed by the village of birth		
If Yes , Please List them:			
Are you 18 years of age or older?	<u>(</u>	Yes No	

History:

Have you ever been convicted of a crime?				
If Yes , Please Explain:				
Are you a citizen of the United States?				
If No, are you legally eligible t	o work in the United States?		Yes No	
Military Service?	es No Branch/Rank:			
Discharge Date & Type:				
Do you have a valid Driver's License?				
If Yes , please list number and	State:		State:	
Do you have any commercial endorsements?				

Educational Background:

	Name/Location of Institution	Current Status	Major Area of Study	Type of Degree and Date Earned
		Graduated		
High School		Still Attending		
		Did Not Finish		
		Graduated		
Undergraduate College		Still Attending		
		Did Not Finish		
		Graduated		
Graduate College		Still Attending		
		Did Not Finish		
		Graduated		
Business/Trade School		Still Attending		
		Did Not Finish		
		Graduated		
Other		Still Attending		
		Did Not Finish		

Do you possess any special certifications (technical, first aid, public safety, etc.)?

Yes

No

If Yes, please list:

Work History (list most-recent first):

Dates	From	Organization Name/Address:	
Month	Year		
		Reason for Leaving:	
		Beg. Salary:	
Date	es To		
Month	Year	Title:	
		Duties Performed:	
Dates	From	Organization Name/Address:	
Month	Year		
		Reason for Leaving:	
		Beg. Salary:	
Date	es To	Supervisor Name:	
Month	Year	Title:	
		Duties Performed:	
Dates	From	Organization Name/Address:	
Month	Year	Position Title:	
		Reason for Leaving:	
		Beg. Salary:	
Date	es To	Supervisor Name:	
Month	Year	Title:	
		Duties Performed:	

References:

List names and contact information for three individuals not related to you, whom you have known for at least one year.

Name	Position	Years Known	Address & Phone

Please provide any additional information such as special skills, training, management experience, equipment operation or qualifications that you would like the Village of Birch Run to note in consideration of you for employment:

Agreement and Understanding

By signing this application, I hereby represent that the facts set forth in my application for employment are true and complete. I understand that if I am employed, any false statement on this application may result in my dismissal.

I authorize the Village of Birch Run to conduct a background investigation to determine my fitness as a candidate for employment with the Village of Birch Run. I understand that said background investigation may include information regarding my character, general reputation, personal characteristics, mode of living, driving record, credit history, education, and employment history. I understand that in the event I am not employed because of an unfavorable credit report, the Village will notify me and provide me a copy of the credit report.

I authorize review and/or release and full disclosure of my personnel records from my employer and from any of my former employers. I hereby waive written notice from my employer and from any of my former employers regarding the disclosure of disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records. This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.

I authorize any person or entity contacted by the Village of Birch Run, its officers, agents, or employees during the course of my background investigation, to furnish to such officers, agents, or employees any information or opinions they may have. I hereby release from liability and promise to hold harmless under any and all possible legal action, any and all persons or entities who shall furnish any information or opinions to the Village of Birch Run, its officers, agents, or employees connected with my background investigation.

Further, I hereby release from liability and promise to hold harmless under any and all possible legal action, the Village of Birch Run, its officers, agents, or employees for any and all actions connected with my background investigation.

I understand that if I am considered favorably for employment, I may be required to undergo, at the Village's expense, a medical examination that will include drug screening and that cooperating in the administration of this test and passing it are conditions for employment.

I understand that this application is not intended to be a contract of employment, nor does this application obligate the Village of Birch Run in any way if the Village decides to employ me. If employed by the Village, I agree to conform to the rules and regulations of the Village of Birch Run, as they may be amended from time to time, and I understand and agree that any employment is at-will and can be terminated by either party with or without notice, at any time, for any reason or no reason. No one other than the Village Manager or the Village Council has any authority to enter into any agreement for employment for any specified period of time or to make any agreement contrary to the foregoing and then only in written form signed by the Village Manager. I further acknowledge that no one has made any representations or statements to the contrary to me, either oral or in writing, and I acknowledge and understand that no one has the authority to make such representations or statements to the contrary in the future.

I further stipulate that a photocopy or facsimile of this agreement and understanding will hold the same validity as an original thereof, even though said photocopy or facsimile does not contain an original signature.

I have read, understand, and agree to the terms of each of the above statements.

Signature of Applicant

Date

Printed Name of Applicant