



## VILLAGE OF SILVER LAKE

2961 KENT ROAD  
SILVER LAKE, OHIO 44224  
330.923.5233-PHONE

# Application for Employment

EQUAL OPPORTUNITY EMPLOYER

### APPLICANT INFORMATION

Name					Date	
Street Address					Apartment/Unit #	
City		State		ZIP		
Phone			E-mail Address			
Position Applied for						
Are you 18 or over?	Date Available			Salary Desired		
Are you a citizen of the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>			If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/>			If so, when?			
Have you ever been convicted of a felony? YES <input type="checkbox"/> NO <input type="checkbox"/>			If yes, explain:			

### EDUCATION

Name & Location of School	Years Attended	When did You Graduate?	Subjects Studied
High School			
College			
Other			

### GENERAL INFORMATION

Subjects of special study/research Work or special training/skills	
U.S. Military or Naval Service	Rank

### REFERENCES

*Please list three professional references, not related to you, whom you have known at least one year.*

Name	Phone	Relationship	Years known

**PREVIOUS EMPLOYMENT**

Company Name & Address		Phone	
Job Title	Supervisor		
Responsibilities		Ending Salary \$	
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company Name & Address		Phone	
Job Title	Supervisor		
Responsibilities		Ending Salary \$	
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company Name & Address		Phone	
Job Title	Supervisor		
Responsibilities		Ending Salary \$	
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize investigation of all statements contained herein and the references and employers listed to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I authorize an investigation, as permitted by law, concerning any criminal conviction in my background and pertinent information involving my personal credit history.

This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.

Signature	Date
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**DO NOT WRITE BELOW THIS LINE**

REMARKS:		
Start Date:	Position:	Wage:
Approved:	Date:	