Village of Phillipsburg, Ohio
Application for Employment

An Equal Opportunity Employer
Please Print

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

Position(s) applied for:		Date of Application:
Name: Last	First	Middle
Address: Street	City	State Zip Code
Phone #:	Mobile/Cell/Other Phone #:	E-mail Address:
Are you legally eligible for employment in this country?		❑ Yes ❑ No
Date available for work:	What is your desired salary range?	
Type of employment desired: ❑ Full-Time ❑ Part-Time ❑ Temporary		
Are you able to meet the attendance requirements of the position?		❑ Yes ❑ No
Have you ever pled "guilty" or "no contest" to, or been convicted of, a crime?		❑ Yes ❑ No
If Yes, please provide date(s) and details:		

Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation, and position applied for will be taken into account.

Driver's License # (if driving is an essential job function):	State:

Employment History

Provide the following information for your past four (4) employers, assignments, or volunteer activities, starting with the most recent.

From:	To:	Employer:	Phone #:
Starting Job Title:	Final Job Title:	Address:	
Immediate Supervisor and Title:		Summary of Work Performed and Job Responsibilities:	
May we contact for reference? ❑ Yes ❑ No ❑ Later			
Reason for Leaving:		Starting Rate/Salary: $ per	Final Rate/Salary: $ per

From:	To:	Employer:	Phone #:
Starting Job Title:	Final Job Title:	Address:	
Immediate Supervisor and Title:		Summary of Work Performed and Job Responsibilities:	
May we contact for reference? ❑ Yes ❑ No ❑ Later			
Reason for Leaving:		Starting Rate/Salary: $ per	Final Rate/Salary: $ per

From:	To:	Employer:	Phone #:
Starting Job Title:	Final Job Title:	Address:	
Immediate Supervisor and Title:		Summary of Work Performed and Job Responsibilities:	
May we contact for reference? ❑ Yes ❑ No ❑ Later			
Reason for Leaving:		Starting Rate/Salary: $ per	Final Rate/Salary: $ per

From:	To:	Employer:	Phone #:
Starting Job Title:	Final Job Title:	Address:	
Immediate Supervisor and Title:		Summary of Work Performed and Job Responsibilities:	
May we contact for reference? ❑ Yes ❑ No ❑ Later			
Reason for Leaving:		Starting Rate/Salary: $ per	Final Rate/Salary: $ per

Skills and Qualifications

Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background (if job related)

Name and Location	Number of Years Completed	Did You Graduate?		Course of Study
High School				
College		Major	Degree	
Other				

References

Name	Telephone	Number of Years Known
	( )	
	( )	
	( )	

Applicant Statement

I certify that all information I have provided to apply for and secure work with the Village of Phillipsburg is true, complete, and correct.

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume, or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives for seeking, gathering, and using such information in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment, and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

Do not sign until you have read the above applicant statement.

I certify that I have read, fully understand, and accept all terms of the foregoing Applicant Statement.

Signature of Applicant:	Date / /

I can work early in the morning	❑ Yes	❑ No
dependable way to get to and from work	❑ Yes	❑ No

What does your ideal schedule look like?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

When can you NOT work?

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Are you seeking a full-time or part-time position?
Full-time Part-time

Talk about yourself and experiences

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_____

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_____

Why do you want to work for the Village of Phillipsburg?

_____

_____

_____

_____

Describe any special skills or training that you think might be useful

_____

_____

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_____

Please return to:

Village of Phillipsburg Municipal Offices
Attn: Fiscal Officer
10868 Brookville Phillipsburg Road
PO Box 172
Phillipsburg, Ohio 45354