



City of Plainwell Application for Employment

211 N. Main St.
Plainwell, Michigan 49080
www.plainwell.org
(269) 685-6821

The City of Plainwell is an Equal Opportunity Employer.

We consider all candidates without regard to sex, race, color, age, height, weight, marital status, national origin, religion, disability, color, familial status, sexual orientation, gender identity or expression, genetic traits, veteran status, or any other legally protected status or activity.

We will attempt to provide reasonable accommodation for eligible individuals upon request.

Instructions

Type or print in ink. Complete all questions, using additional paper if necessary.

Position applied for: _____ Where did you see this position advertised: _____

Name: _____
Last First Middle

Address: _____
Number Street City State Zip Code

Telephone #: (____) _____ Cell #: (____) _____ E-Mail Address: _____

If you are under 18 years of age, and it is required, can you provide a work permit? Yes No
If "Yes", please attach a work permit. If "No", please explain _____

Have you ever been employed by the City of Plainwell? Yes No
If "Yes", please give dates of employment and position _____

Are you related to any City of Plainwell elected officials or employees? Yes No
Please provide their names, departments, and relationship to you _____

Are you legally authorized to work in the United States? Yes No

Are you currently on lay-off or subject to a recall? Yes No

Date available for work: _____ / _____ / _____ What is your desired salary or hourly rate? _____

Type of employment desired Full-time Part-time Seasonal/Variable Hour Educational Internship

Can you work overtime and/or weekends if required? Yes No

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation)?

This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, need for an accommodation, or your specific situation. These issues may be discussed at a later stage.

Yes No I have not reviewed the "essential functions" of the position for which I am applying.

Excluding minor traffic civil violations, have you ever pled "guilty" or "no contest" to, or been convicted of a crime? Yes No

If "Yes", provide date(s) and details _____

Note: Except where required by law, a conviction will not necessarily bar you from employment.

Are there any felony charges pending against you? Yes No

If "Yes," provide date(s) and details _____

Note: Pending charges will not necessarily bar you from employment. Do not identify any pending misdemeanor charges.

Have you ever been dismissed or asked to resign from a previous job? Yes No

If "Yes", please explain _____

Employment History

List your employment history for the past 10 years, starting with your current or most recent employer.

note: If attaching a resume, writing "see resume" is acceptable for duplicate information.

<p>Starting Job Title/Final Job Title _____</p> <p>Company Name and Immediate Supervisor _____</p> <p>Address _____</p> <p>City, State, Zip _____ Telephone # _____</p> <p>Describe the type of work performed _____ _____</p> <p>Reason for leaving: _____</p>	<p>Dates employed (Month/Year) From: _____ / _____ To: _____ / _____</p> <p>Starting <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Final <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Average hours worked per week: _____</p> <p>Number of employees supervised: _____</p> <p>May we contact this employer for reference <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Starting Job Title/Final Job Title _____</p> <p>Company Name and Immediate Supervisor _____</p> <p>Address _____</p> <p>City, State, Zip _____ Telephone # _____</p> <p>Describe the type of work performed _____ _____</p> <p>Reason for leaving: _____</p>	<p>Dates employed (Month/Year) From: _____ / _____ To: _____ / _____</p> <p>Starting <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Final <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Average hours worked per week: _____</p> <p>Number of employees supervised: _____</p> <p>May we contact this employer for reference <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Starting Job Title/Final Job Title _____</p> <p>Company Name and Immediate Supervisor _____</p> <p>Address _____</p> <p>City, State, Zip _____ Telephone # _____</p> <p>Describe the type of work performed _____ _____</p> <p>Reason for leaving: _____</p>	<p>Dates employed (Month/Year) From: _____ / _____ To: _____ / _____</p> <p>Starting <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Final <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Average hours worked per week: _____</p> <p>Number of employees supervised: _____</p> <p>May we contact this employer for reference <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Starting Job Title/Final Job Title _____</p> <p>Company Name and Immediate Supervisor _____</p> <p>Address _____</p> <p>City, State, Zip _____ Telephone # _____</p> <p>Describe the type of work performed _____ _____</p> <p>Reason for leaving: _____</p>	<p>Dates employed (Month/Year) From: _____ / _____ To: _____ / _____</p> <p>Starting <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Final <input type="checkbox"/> Hourly <input type="checkbox"/> Salary \$ _____ Bonus/Commission/Other? \$ _____</p> <p>Average hours worked per week: _____</p> <p>Number of employees supervised: _____</p> <p>May we contact this employer for reference <input type="checkbox"/> Yes <input type="checkbox"/> No</p>

For positions listed in your employment history, please identify any aliases or alternative names used: _____

Please explain any gaps in your employment, other than those caused by personal illness, injury, or disability:

Summarize any special training, accomplishments, professional memberships, skills, licenses, and/or certificates (CDL, MCOLES, military experience, trade specific licenses, CPR) that may assist you in performing the position for which you are applying: _____

Educational Background

<u>Highest grade completed in high school</u> 8 9 10 11 12 GED Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No	<u>Name of High School</u>	<u>Location</u>	
College, University, Vocational, Trade, or Technical School	Areas of Study	Degree or Trade	Credit hours completed or documentation

References

Provide the name, relationship, and telephone number of three non-related school, business or work references.

NAME	TITLE	RELATIONSHIP	TELEPHONE	# OF YEARS KNOWN

Applicant Statement

Instructions: Please carefully read the following paragraphs and initial each paragraph. By doing so, you hereby acknowledge that you have read, understand, and agree to the terms.

I certify that the information in this application is true, complete, and correct to the best of my knowledge and I understand that any falsification, misstatement, misrepresentation, or omission of any information submitted in connection with my application, resume, or interview, whether in this document or not, may result in rejection of my application or, if hired, in dismissal from employment. I agree to notify the City of Plainwell (“City”) if any of the information disclosed in this application changes while my application is pending or, if hired, during my employment.

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

I understand that under Michigan Law, disabled applicants and employees may request an accommodation for their disability by notifying the City, in writing, of the need for an accommodation within one hundred eighty-two (182) days of the date the individual knew or reasonably should have known that an accommodation was needed. Failure to do so will preclude a claim that the City failed to accommodate the disability under Michigan Law. _____

If I am hired, I understand that I am an At-Will employee, and either I or the City reserves the right to terminate my employment at any time, with or without cause, and with or without prior notice. I understand that this application does not constitute an agreement or contract for employment for any specified period of time. I understand that no employee or representative of the City is authorized to make any assurances contrary to the provisions of this paragraph. I understand that no oral or written agreements contrary to the provisions of this paragraph are valid unless they are in writing and signed by both the City Manager and myself. _____

I voluntarily authorize the City, 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, any other written materials submitted during the hiring process (for example, a resume), or during any job interview. I hereby voluntarily and freely release the City of any individual or company from any and all liability including liability for defamation (libel and slander) for releasing or using information concerning me and my performance record, and work, academic, or military experience. _____

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

I agree and understand that any potential employment offer is conditional upon the results of the post-offer, pre-employment reference and/or credit check, criminal background check, driving record check (if applicable), drug screening and medical examination. _____

I HAVE READ, UNDERSTAND AND AGREE TO THE TERMS OF EACH OF THE ABOVE STATEMENTS.

Signature

Date



Return the completed application form and all other required documents to:

**City of Plainwell - Human Resources
211 N. Main St.
Plainwell, MI, 49080**

Applications received after the posted deadline will not be considered.

Thank you for applying with the City of Plainwell and we wish you well in your career search.