

# HURON TOWNSHIP EMPLOYMENT APPLICATION

22950 Huron River Dr Phone: (734) 753-4466  
 New Boston MI 48164 Fax: (734) 753-4111

Department: \_\_\_\_\_



Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap, or veteran status.

## Personal Information

Last	First	MI	Email		
Street Address		City	State	ZIP	Contact Number
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are You 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you been convicted of a felony or been incarcerated in connection with a felony in the past seven years? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, please explain:			
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No	Branch	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No		War	
What position are you applying for?		How did you hear about this position?			
Expected Hourly Rate	Expected Weekly Earnings	Date Available			
Have you ever applied with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you willing to work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## Prior Work Experience

	Current or Most Recent	Prior	Prior
Employer			
Address			
City, ST, ZIP			
Telephone			
Name of Immediate Supervisor			
Dates of Employment	From To	From To	From To
Position/ Job Title			
Pay			
Reason for Leaving			
May we Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

## Education

	Name/Location	Last Year Complete	Degree	Major
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				

List any applicable skills, training, or proficiencies:

## Personal References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer- By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records. I understand that the employer may engage in investigative background check to include consumer reporting agency report. I authorize the employer to do so. I further understand that I have the right, at my request, to information on the reporting agency used so I may obtain the nature and substance of information provided to the employer. I understand that the acceptance of an offer of employment does not create a contractual obligation upon the employer to continue to employ me in the future.

Signature

Date