

### VILLAGE OF CUYAHOGA HEIGHTS 4863 East 71<sup>st</sup> Street Cuyahoga Heights, Ohio 44125 (216) 641-7020

### **APPLICATION FOR EMPLOYMENT - REHIRE**

VILLAGE OF CUYAHOGA HEIGHTS is an **Equal Opportunity Employer** and complies with Federal and State equal employment opportunity laws. Qualified applicants are considered for all positions without regard to race, color, religion, gender, national origin, age, marital status, military status, disability or any other protected basis.

Please print all answers. <u>INFORMATION MUST BE TYPED OR FILLED OUT IN INK</u>. This application will not be considered unless fully completed and signed.

### **PERSONAL INFORMATION**

Position for which you are applying (Please be specific)		Date available for work:			
		Full Time	Regular 🗖		
		Part Time	Seasonal		
Name (Last Name, First Name, Middle Initial)		D	ate:		
		D	ate you can start:		
Current Home Address: Street		City, State, Zip Code			
How long at current address?		Email Address:			
_					
Provide any prior address in the past year:					
Street		City, State, Zip Code			
Telephone Number:	Are you at least 18 years	of age?  Yes	□ No		
		ge: (Employment may be subject to minimum legal age			
	verification.)				
Have you ever worked or applied for work with the Village of Cuyahoga Heights before?					
If we arrive details including actional data of any large and according to be large a					
If yes, provide details, including original date of employment and reason for leaving.					
Are there any hours, shifts or days you cannot or will not work?		□ Yes □	No		
If yes, indicate the hours, shifts or days you cannot or will not work:					
Will you work overtime if required?		D No			

# **EMPLOYMENT HISTORY (Since August 2018)**

Please list <b>ALL JOBS</b> , beginning with your present or last employer since last employed with the Village or since August 2018. A following section asks questions about periods of employment. Account for ALL time periods, including UNEMPLOYMENT, SELF-EMPLOYMENT, and U.S. MILITARY SERVICE. If space is insufficient, list on a separate page or additional application form.					
EMPLOYER:	PHONE:	Position			
Address	City, State, Zip	Supervisor's Name			
Duties		Starting Salary/Wages			
		Final Salary/Wages			
Reason for leaving		From	То		
EMPLOYER:	PHONE:	Position			
Address	City, State, Zip	Supervisor's Name			
Duties		Starting Salary/Wages			
		Final Salary/Wages			
Reason for leaving		From	То		

## FOR APPLICANTS UNDER THE AGE OF EIGHTEEN (18) YEARS ONLY

I am aware that my son/daughter has submitted an employment application with the Village of Cuyahoga Heights and verify that he/she is currently \_\_\_\_\_\_ years of age.

insert age

Signature of Parent or Legal Guardian

Print name of Parent or Legal Guardian

Address, City, State, Zip Code

Phone Number (s)

## **APPLICANT STATEMENT**

I understand that the information provided on this application (and accompanying resume, if any) must be true and complete to the best of my knowledge. I also understand that any false information or omission may disqualify me from further consideration of employment and may result in my dismissal if discovered at a later date.

I authorize a thorough investigation of my past employment and relevant activities, agree to cooperate in such investigation, and release from all liability or responsibility all persons and corporations requesting or supplying such information. I further authorize any physician or hospital to release any information which may be necessary to determine my ability to perform the job for which I am being considered or any future job in the event that I am hired.

If an employment relationship is established, I understand that I must comply with Village policies, rules and procedures as are implemented from time to time and that the Village may add to, delete or revise these policies, rules and procedures at any time. I also understand that any period of employment is not for a specific duration.

My signature below certifies that this application was completed by me and that all entries on it and information in it are true and complete to the best of my knowledge.

Signature of Applicant

Date

NOTICE: This application is considered active for sixty (60) days from the above date. For further consideration after this date, a new application must be submitted.

Interviewed by:

Date:

This space for Human Resource Department Use Only: