



**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. INFORMATION MUST BE TYPED OR FILLED OUT IN INK. 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 <input type="checkbox"/> Regular <input type="checkbox"/> Part Time <input type="checkbox"/> Seasonal <input type="checkbox"/>	
Name (Last Name, First Name, Middle Initial)		Date: _____ Date 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? <input type="checkbox"/> Yes <input type="checkbox"/> No If No, state your age: _____. (Employment may be subject to minimum legal age verification.)		
Have you ever worked or applied for work with the Village of Cuyahoga Heights before?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
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? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, indicate the hours, shifts or days you cannot or will not work:	
Will you work overtime if required? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Office Use Only: Employee # _____ Hire Date _____ Rate of Pay \$ _____
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## 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:	