

City of Woodhaven 21869 West Road Woodhaven, MI 48183

Employment Application

		Applicant I	nform	ation					
Full Name:	Last	First			M.I.	Date:			
Address:	Street Address					Apartment/Unit #			
	City				State	ZIP Code			
Phone:			Email						
Date Availal	ble:	Social Security No.:			Desire	d Salary: <u>\$</u>			
Position App	olied for:								
YES NO YES Are you a citizen of the United States? YES NO YES If no, are you authorized to work in the U.S.?						NO			
Have you ev	ver worked for this com	YES NO pany?	If yes,	when?_					
		Edua	otion						
		Educ							
High School	:	Address:							
From:	To:	Did you graduate?	YES	NO	Diploma:				
College:		Address:							
From:	To:	Did you graduate?	YES	NO	Degree:				
Other:		Address:							
From:	To:		YES	NO					
References									
Please list t	hree professional refe	erences.							
Full Name:					Relation	nship:			
Company:					P	hone:			
Address:									

Full Name:				Relationship:	
Company:			Phone:		
Address:					
Full Name:				Relationship:	
Company:				Phone:	
Address:					
	Previous E	mployme	ent		
Company:			Phone:		
Address:		Supervisor:			
Job Title:	Starting Salary:			Ending Salary:	
Responsibilit	ies:				
From:	To: Reason for Leaving:				
May we conta	act your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S.	Ending Salary:			
Responsibilit	ies:				
From:	To:	or Leaving:			
May we conta	act your previous supervisor for a reference?	YES	NO		
Company:				Phone:	
Address:				Supervisor:	
Job Title:	Starting S.	Ending Salary: \$			
Responsibilit	ies:				
From:	To:				
May we conta	act your previous supervisor for a reference?	YES	NO		

Skills and Abilities
Please describe the skills, knowledge, and abilities you have acquired, either through education or experience, that qualify you for the desired position.
Disclaimer and Signature
I certify that the information contained in this application is correct to the best of my knowledge. I understand that to falsify information is grounds for refusing to hire me, or for discharge should I be hired.
I authorize any person, organization or company listed on this application to furnish you any and all information concerning my previous employment, education and qualifications for employment. I also authorize you to request and receive such information.
In consideration for my employment, I agree to abide by the rules and regulations of the company, which rules may be changed, withdrawn, added or interpreted at any time, at the company's sole option and without prior notice to me.
I also acknowledge that my employment may be terminated, or any offer or acceptance of employment withdrawn, at any time, with or without cause, and with or without prior notice at the option of the company or myself.

Signature: _____ Date:____