



It is the policy of Mt. Pleasant to extend its employment opportunities to qualified persons on a non-discriminatory basis. Selection shall be made without regard to an individual's age, race, color, sex, national origin, religion, marital status, sexual orientation, handicap or membership in any other protected classification. Only necessary qualifications for the job being filled will be considered in the selection process.

Date

PERSONAL INFORMATION

Name (Last, First, Middle)	Telephone number
Present Address (Street, City, State & Zip)	Email Address

EMPLOYMENT DESIRED

Position	Full-time or Part-Time	Date Available
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Are you employed now?	If so, may we contact your present employer?	Have you ever applied for employment with the Village? If yes, when?
Are any of your relatives presently employed with the Village? If yes, please provide name and position.		
Only U.S. Citizens or aliens who have a legal right to work in the U.S. are eligible for employment. Can you, upon employment, provide genuine documentation establishing your identity and eligibility to be employed in the U.S.?		
Have you ever been convicted of, or pled guilty or NOLO contendere to any violations of law other than minor traffic violations? If yes, please explain. (A conviction record will not automatically bar you from employment and will only be considered as it relates to the particular job in question)		
Are any criminal charges or proceedings pending against you? (A pending criminal charge will not automatically disqualify you from employment and will only be considered as it relates to the particular job in question) If yes, please explain.		
Can you with or without reasonable accommodations perform the Essential Functions of the job for which you are applying?		

EDUCATION/EXPERIENCE

SCHOOL LEVEL	NAME AND ADDRESSES OF SCHOOLS ATTENDED	MAJOR FIELD OF STUDY	DID YOU GRADUATE? YES/NO
HIGH SCHOOL			
COLLEGE			
ASSOCIATE DEGREE(S)			

List any other applicable skills or qualifications.

EMPLOYERS (Please begin with your present or most recent employer. Account for all periods of employment from completion or education to present).

INDICATE IF ANY PRIOR EMPLOYMENT IS UNDER A DIFFERENT NAME

Name and Address of Present or Last Employer		
Starting Date (Month/Year)		Leaving Date (Month/Year)
Weekly Starting Salary	Weekly Final Salary	Job Title
Name of Supervisor		Phone Number
Description of Work		
Reason for Leaving		

Name and Address of Present or Last Employer		
Starting Date (Month/Year)		Leaving Date (Month/Year)
Weekly Starting Salary	Weekly Final Salary	Job Title
Name of Supervisor		Phone Number
Description of Work		
Reason for Leaving		

Name and Address of Present or Last Employer		
Starting Date (Month/Year)		Leaving Date (Month/Year)
Weekly Starting Salary	Weekly Final Salary	Job Title
Name of Supervisor		Phone Number
Description of Work		
Reason for Leaving		

MAY WE CONTACT YOUR PRESENT EMPLOYER? ____ YES ____ NO

ACCOUNT FOR PERIODS OF UNEMPLOYMENT OTHER THAN WHEN YOU WERE IN SCHOOL

REFERENCES: GIVE BELOW THE NAMES OF at least THREE PERSONS NOT RELATED TO YOU WHOM YOU HAVE KNOWN FOR ONE YEAR OR MORE.

Name			Email Address
Home Address/ Phone Number			Phone number is to: Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>
Business / Address if applicable			
Is this a personal or business acquaintance?	Business <input type="checkbox"/>	Personal <input type="checkbox"/>	Years Acquainted

Name			Email Address
Home Address/ Phone Number			Phone number is to: Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>
Business / Address if applicable			
Is this a personal or business acquaintance?	Business <input type="checkbox"/>	Personal <input type="checkbox"/>	Years Acquainted

Name			Email Address
Home Address/ Phone Number			Phone number is to: Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>
Business / Address if applicable			
Is this a personal or business acquaintance?	Business <input type="checkbox"/>	Personal <input type="checkbox"/>	Years Acquainted

Name			Email Address
Home Address/ Phone Number			Phone number is to: Cell <input type="checkbox"/> Home <input type="checkbox"/> Work <input type="checkbox"/>
Business / Address If applicable			
Is this a personal or business acquaintance?	Business <input type="checkbox"/>	Personal <input type="checkbox"/>	Years Acquainted

Release of Information Authorization

PLEASE READ CAREFULLY BEFORE SIGNING

I CERTIFY THAT ALL THE INFORMATION ON THIS APPLICATION IS CORRECT AND MAY BE INVESTIGATED. I understand that falsification, misrepresentation or omission of facts will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application for employment with the Village of Mount Pleasant does not guarantee employment. I further understand that should an offer of employment be extended by the Village of Mount Pleasant that such employment is At Will, for no specified duration and may be terminated by either myself or the Village of Mount Pleasant at any time, with or without reason or notice.

I hereby authorize the Village of Mount Pleasant, its agents, officers or employees to conduct a comprehensive review of my background. I voluntarily and knowingly authorize any former employer, person, firm, corporation, organization, school, or government agency, its officers, employees and agents, to release all information concerning me that said individual, company, firm, corporation or public agency may have, to include information or data received from other sources, to the Village of Mount Pleasant, its officers, employees and agents, or any other person or entity making a written or oral request for such information on behalf of the Village of Mount Pleasant. I understand the information that is sought may include, but is not necessarily limited to, employment history, drug testing, consumer reports, civil and criminal records, records from any governmental criminal justice agency, driving records, social security verification and any public record information. I recognize a copy of this authorization and release is as valid as the original and should be considered as such.

I voluntarily and knowingly, fully release and discharge, absolve, indemnify and hold harmless the Village of Mount Pleasant, and such former employer, person, firm, corporation, school or government agency, its officers, employees and agents from any and all claims, liability, demands, causes of action, damages, or costs, including attorney's fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incidental to the disclosure or release except for the malicious and willful disclosure of derogatory facts concerning my employment made for the express purpose of preventing me from obtaining employment which the officer, employee or agent disclosing such facts knows are untrue.

I further understand that pursuant to the Fair Credit Reporting Act, should the Village of Mount Pleasant or its agents obtain a consumer credit report as part of the background check, if any adverse action is to be taken based upon the consumer report, a copy of the report and a summary of the consumer's rights will be provided to me.

I understand that any offer of employment is contingent upon successful completion of the background check and satisfactory completion of a physical examination and drug test.

_____ Applicant's Printed Name	_____ Signature	_____ Date
_____ House #	_____ Street Name	_____ Apt. #
_____ City	_____ State	_____ Zip Code
_____-_____-_____ Social Security Number	_____ Date of Birth	_____ Driver's License Number