



City of Keego Harbor Application for Employment

Application Received	
Date:	_____
Initials:	_____

The City of Keego Harbor is an equal opportunity employer and shall consider all qualified applicants for all positions without regard to race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, disability, or any other protected category. Individuals with a disability who require assistance or an accommodation to apply for a position, should contact the city manager.

POSITION(S) APPLIED FOR

LAST NAME			FIRST NAME			MIDDLE NAME					
ADDRESS STREET			CITY			STATE			ZIP CODE		
TELEPHONE NUMBER(S)											

Are you a blood or in-law relative to any City of Keego Harbor elected official or the city manager? Yes No

If you checked YES: _____
Name Relationship

Are you under 18 years of age? Yes No

Have you ever been employed by the City of Keego Harbor? Yes No

If you checked YES: _____
Position Department Dates

Have you ever been convicted of a crime or are there any felony charges pending against you? Yes No

If you checked YES, completely describe including location and date:

A conviction record will not necessarily be a bar to employment. Factors such as age, time of offense, seriousness and nature of the violation, and rehabilitation will be considered.

EDUCATION & TRAINING

	HIGH SCHOOL	VOCATIONAL-TECHNICAL	COLLEGE
SCHOOL NAME			
CITY/STATE			
DID YOU GRADUATE?	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> GED	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
	DEGREE/CERTIFICATE		
	MAJOR		
	MINOR		

Describe any specialized training, apprenticeships, internships, skills, licenses, certificates, and extra-curricular activities or hobbies that might pertain to the position that you are applying for:

List professional, trade, business group memberships and offices held excluding groups the name and character of which indicate race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, disability, or any other protected class:

MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States of America or in a state national guard? Yes No

If YES, which branch of the service? _____

What was your rank at discharge? _____

Date of discharge? _____

Were you honorably discharged? Yes No

A dishonorable discharge from the military will not necessarily be a bar to employment.

EMPLOYMENT HISTORY

LIST EACH JOB HELD. START WITH YOUR PRESENT OR LAST JOB FIRST.

EMPLOYER	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
TELEPHONE			
JOB TITLE	HOURLY RATE OR SALARY		
SUPERVISOR	START	FINAL	
REASON(S) FOR LEAVING			

EMPLOYER	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
TELEPHONE			
JOB TITLE	HOURLY RATE OR SALARY		
SUPERVISOR	START	FINAL	
REASON(S) FOR LEAVING			

EMPLOYER	DATES		WORK PERFORMED
ADDRESS	FROM	TO	
TELEPHONE			
JOB TITLE	HOURLY RATE OR SALARY		
SUPERVISOR	START	FINAL	
REASON(S) FOR LEAVING			

Agreement and Understanding

1. I certify that the information contained in my application for employment is correct to the best of my knowledge and understand that falsification or misrepresentation of any information submitted in my application or in connection with my application may result in dismissal.
2. I agree and authorize that an investigative report may be prepared to determine my fitness as a candidate for employment with the City of Keego Harbor. I understand that said investigative report may include information as to my character, general reputation, police record, personal characteristics, mode of living, and financial and credit fitness. I understand that in the event I am not employed because of an unfavorable credit report, the City will notify me and provide me a copy of the credit report.
3. I authorize review and/or release and full disclosure of my personnel records from my employer and from any of my former employers. I hereby waive written notice from my employer and from any of my former employers regarding the disclosure of disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records. This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.
4. I authorize any person or entity contacted by the City of Keego Harbor, its officers, agents, or employees during the course of my background investigation, to furnish to such officers, agents, or employees any information or opinions they may have.
5. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action, the City of Keego Harbor, its officers, agents, or employees for any and all actions connected with the conduct of my background investigation.
6. I hereby release from liability and promise to hold harmless under any and all possible causes of legal action, any and all persons or entities who shall furnish any information or opinions to the City of Keego Harbor, its officers, agents, or employees connected with my background investigation.
7. If employed by the City of Keego Harbor, I agree to conform to the rules and regulations of the City of Keego Harbor, as they may be amended from time to time, and I agree and understand that my employment and compensation can be terminated with or without cause and with or without notice at any time at the option of either the City of Keego Harbor or myself. I understand that no officer or representative of the City of Keego Harbor has the authority to enter into an agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing, except the City Council or City Manager of the City of Keego Harbor. Any such agreement must be made in writing and directed to me personally. I further acknowledge that no one has made any representations or statements to the contrary to me, either oral or in writing, and I acknowledge and understand that no one has the authority to make such representations or statements to the contrary in the future.
8. A photocopy or facsimile of this agreement and understanding will be as valid as an original thereof, even though said photocopy or facsimile does not contain an original signature.

I have read, understand and agree to the terms of each of the above statements.

Signature

Date

Name Printed