



**EMPLOYMENT APPLICATION**

31555 W. 11 Mile Road,  
Farmington Hills, MI 48336 - 1165  
www.fhgov.com

**We consider applicants for all positions without regard to religion, race, color, national origin, age, sex, height, weight, disability, marital or veteran status, or any other legally protected status.**

(Please Print in Ink)

Position Applied for \_\_\_\_\_ Date of Application \_\_\_\_\_

List any relatives who are Council Members, Appointees or Employees of the City.

Name \_\_\_\_\_  
Last First Name Middle

Address \_\_\_\_\_  
Street

City State Zip Code

Telephone \_\_\_\_\_  
Home Other e-mail address

Have you ever filed an application with us before? \_\_\_ Yes \_\_\_ No  
If yes, give approximate date. \_\_\_\_\_

Have you ever been employed with us before? \_\_\_ Yes \_\_\_ No  
If yes, give dates. \_\_\_\_\_

Have you ever been bonded? \_\_\_ Yes \_\_\_ No  
If yes, indicate reason. \_\_\_\_\_

May we contact your present employer? \_\_\_ Yes \_\_\_ No

Are you 18 years of age or older? \_\_\_ Yes \_\_\_ No

Can you provide proof of eligibility for employment in the United States? \_\_\_ Yes \_\_\_ No  
(Proof of citizenship or immigration status will be required upon employment)

Do you have a valid driver's license? \_\_\_ Yes \_\_\_ No

License Number \_\_\_\_\_ State \_\_\_\_\_

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  
\_\_\_ Full Time \_\_\_ Part Time \_\_\_ Temporary \_\_\_ No. of Hrs.

Have you ever been convicted of anything other than a minor traffic violation? \_\_\_ Yes \_\_\_ No

Do you have any felony charges pending against you? \_\_\_ Yes \_\_\_ No

If you answer yes to either of the above questions, please provide dates, places, charges and disposition of **all** convictions.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**

## EDUCATION & TRAINING

Are you a high school graduate?     Yes     No

Educational Inst. attended beyond High School	Location (State)	Course or Major Studies	Dates of Attendance	# of Credits Completed	Grade Average	Degree or Certificate Type    Year

Describe any specialized training, apprenticeships, skills, languages, extra-curricular activities, honors.

\_\_\_\_\_

List any professional or trade licenses or certifications. \_\_\_\_\_

\_\_\_\_\_

### Specialized Skills

Electronic cash register     Calculator     WORD     EXCEL     ACCESS  
 (wpm) Typing speed     Publisher     Crystal    \_\_\_\_\_ Other

Heavy/light equipment, motor vehicles and other equipment operated (Please list) \_\_\_\_\_

\_\_\_\_\_

Do you have a valid CDL (Commercial Driver's License)?     Yes     No

### List Professional, Trade, Business or Civic Activities and Office(s) Held

*You may exclude memberships which would reveal sex, race, religion, national origin, age, weight, marital status, disability or other protected status.* \_\_\_\_\_

\_\_\_\_\_

### ADDITIONAL INFORMATION

*Summarize special job-related skills and qualifications acquired from employment or other experience.*

\_\_\_\_\_

\_\_\_\_\_

### MILITARY SERVICE RECORD

Have you had any experience in the Armed Forces of the United States or in the National Guard?     Yes     No

If yes, what branch? \_\_\_\_\_ Rank at discharge \_\_\_\_\_

Type of discharge \_\_\_\_\_ Date of discharge \_\_\_\_\_

Are you in the reserves?     Yes     No    If yes, date obligation ends \_\_\_\_\_

Describe any job-related training received in the United States military.

\_\_\_\_\_

\_\_\_\_\_

## EMPLOYMENT HISTORY

**NOTE: The employment history section must be completed even if a resume is attached. List most recent employment first; include all positions with each employer.**

Employer Name:		Title of Position: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Type of Business:	Address:	Duties:
Supervisor's Name:	City: State:	
Dates Employed: From:          To:	Telephone Number:	
Final Salary/Hourly Rate:	Reason for Leaving:	
Employer Name:		Title of Position: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Type of Business:	Address:	Duties:
Supervisor's Name:	City: State:	
Dates Employed: From:          To:	Telephone Number:	
Final Salary/Hourly Rate:	Reason for Leaving:	
Employer Name:		Title of Position: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Type of Business:	Address:	Duties:
Supervisor's Name:	City: State:	
Dates Employed: From:          To:	Telephone Number:	
Final Salary/Hourly Rate:	Reason for Leaving:	
Employer Name:		Title of Position: <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time
Type of Business:	Address:	Duties:
Supervisor's Name:	City: State:	
Dates Employed: From:          To:	Telephone Number:	
Final Salary/Hourly Rate:	Reason for Leaving:	

Have you ever been dismissed from or asked to resign from any employment position?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## REFERENCES

Please list three persons who have knowledge of your experience and qualifications for this position, **preferably current or previous supervisors, co-workers, instructors, etc. Do not include relatives. If you are known to your references by another name please note.**

Name:	Relationship:
Address:	Telephone:
	Yrs. Acquainted:
Name:	Relationship:
Address:	Telephone:
	Yrs. Acquainted:
Name:	Relationship:
Address:	Telephone:
	Yrs. Acquainted:

## APPLICANT STATEMENT

- 1) I certify that answers given herein are true and complete to the best of my knowledge. I understand my failure to complete this application accurately and in its entirety will be cause for the City of Farmington Hills to disqualify my application.
  
- 2) I authorize the City to perform all checks of my credentials as allowed by law including but not limited to criminal background investigations, driver's license record, drug and alcohol tests, and discussions with: supervisors, co-workers, friends, business associates, or other individuals that the City in its sole discretion, believes may have relevant information regarding my suitability for employment. I agree not to assert any claims or causes of action of any kind against the City, its agents, its employees, or any individual contacted by the City, arising out of the City's investigation. I also waive any right under the Bullard-Plawecki Right to Know Act, 1978 PA 397, to receive written notice from the City or any former or current employer, that disciplinary reports, letters of reprimand, or other disciplinary action taken against me while employed, will be or have been disclosed to a third person or entity. I further release and forever discharge the City, its agents, its employees and the individuals and companies contacted by the City as part of its investigation from any and all claims, demands, damages, actions, causes of action, or suits of any kind or nature whatsoever arising from the City's investigation of my credentials. **I acknowledge that the City has made no representations of any kind as to whether employment will be offered at the conclusion to its investigation.**
  
- 3) This application for employment shall be considered active until the position is filled but in no event will exceed 180 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time. A resume may be attached but is not considered a substitute for the completion of this application or any portion herein.
  
- 4) I hereby understand and acknowledge that, unless specifically and clearly defined by applicable law, contract, collective bargaining agreement, or City policy, any employment relationship with this organization is of an **"at will"** nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization and the Director of Human Resources.
  
- 5) In the event of employment, I understand that false or misleading information given in my application or at any point in the selection process will result in discharge. I also understand that I am required to abide by all rules and regulations of the employer.
  
- 6) I agree and understand that any employment offer is **conditional** upon the results of a post-offer medical examination which may include psychological, drug and alcohol tests.
  
- 7) I agree not to commence any action or suit relating to my employment or the City's failure to offer me employment, more than one year after the date of termination of such employment, or, if not hired, within one year of the date of the application, and to waive any statute of limitations to the contrary, unless such statute of limitations provides a shorter period of time in which to bring a claim or cause of action.
  
- 8) **I understand, acknowledge and hereby consent to each of the above statements and conditions.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT