

Application for Employment
City of Brook Park, OH
Thomas J. Coyne, Jr., Mayor



Jennifer Sinatra, Commissioner, Human Resources

6161 Engle Road Brook Park, OH 44142 216-433-1300 Fax 216-433-1511

The City of Brook Park is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of gender, age, ethnic origin, race, color, religion, sexual preference, gender identity, marital status, disability or handicap, or veteran status.

TODAY'S DATE:

PERSONAL:

Name

Last

First

Middle

Address

Number & Street

City

State

Zip Code

Position Sought _____ Full Time ___ Part Time ___

Date Available _____ Salary Desired _____ Phone Number (_____) _____

Social Security Number _____ Are you over 18 years old? ___ Yes ___ No

Are you legally eligible for employment in the United States? ___ Yes ___ No

(If offered employment, you will be required to provide documentation to verify eligibility.)

EDUCATION: Please indicate education or training which you believe qualifies you for the position you are seeking.

High School: Number of Years Completed (*circle one*) **1 2 3 4**

Diploma: ___ Yes ___ No **G.E.D.:** ___ Yes ___ No

School(s) _____ City/State _____

College and/or Vocational School:

Number of Years Completed (*circle one*) **1 2 3 4**

School(s) _____ City/State _____

Major _____ Degree(s) Earned _____

Other Training or Degrees:

School(s) _____ City/State _____

Major/Course _____ Degree or Certificate Earned _____

LIST PROFESSIONAL LICENSE, MEMBERSHIPS OR OTHER CERTIFICATIONS:

You need not disclose membership in professional organizations that may reveal information regarding race, color, creed, sex, religion, national origin, ancestry, age, disability, marital status, veteran status or any other protected status.

SKILLS :

Office: Data Entry ___ Excel ___ Word ___ PowerPoint ___ Outlook ___ Other ___ Typing ___ WPM ___ Other ___

Have you ever been employed in any facility of the City of Brook Park? ___ Yes ___ No

If so, please state position held, location and dates of employment: _____

EMPLOYMENT: List last employer first, including U.S. Military Service.

May we contact your present employer? ____ Yes ____ No

Present or Last Employer: _____

Address _____ City _____ State ____ Zip _____

Telephone _____ Position held _____

Dates of Employment: From _____ To _____

Salary _____ Supervisor _____ Department _____

Duties _____

Full time __ Part time__ If part time, number of hours ____ Reason for Leaving _____

Previous Employer: _____

Address _____ City _____ State ____ Zip _____

Telephone _____ Position held _____

Dates of Employment: From _____ To _____

Salary _____ Supervisor _____ Department _____

Duties _____

Full time __ Part time__ If part time, number of hours ____ Reason for Leaving _____

Previous Employer: _____

Address _____ City _____ State ____ Zip _____

Telephone _____ Position held _____

Dates of Employment: From _____ To _____

Salary _____ Supervisor _____ Department _____

Duties _____

Full time __ Part time__ If part time, number of hours ____ Reason for Leaving _____

Explain any gaps in work history: _____

PROFESSIONAL REFERENCES:

Name _____

Address _____ Phone (____) _____

Name _____

Address _____ Phone (____) _____

Name _____

Address _____ Phone (____) _____

APPLICANT'S CERTIFICATION AND AGREEMENT

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the City of Brook Park to verify their accuracy and to obtain reference information on my work performance. I hereby release the City of Brook Park from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal. I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment of the Employer. However, I further understand that neither the policies, rules, regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Employer may terminate my employment at any time with or without notice or cause.

Signature of Applicant _____

Date: _____

This application for employment is good for 60 days only. Consideration for employment after 60 days requires a new application.