MILAN
OHIO.gov

Employment Application

Applicant Information

Full Name: _____   Date: _____
          Last   First   M.I.

Address: _____
          Street Address   Apartment/Unit#

_____
          City   State   Zip Code

Phone: _____   Email: _____

Date Available: _____   Desired Salary: $ _____

Position Applied for: _____

Are you a citizen of the United States?   Yes   No   If No, are you authorized to work in the U.S.?   Yes   No

Have you ever worked for the Village of Milan?   Yes   No   If yes, when? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? Yes No Degree: _____

References

Please list three professional references

Full Name: _____   Relationship: _____

Company: _____   Phone: _____

Address: _____

_____

Full Name: _____   Relationship: _____

Company: _____   Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $_____ Ending Salary: $_____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?   Y   N

_____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $_____ Ending Salary: $_____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?   Y   N

_____

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary: $_____ Ending Salary: $_____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?   Y   N

_____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other that honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin or other protected classification.