

Village of Pleasantville

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101 South Main Street Post Office Box 193 Pleasantville, Ohio 43148 Telephone: (740) 468-2237 Fax: (740) 468-3358

The Honorable Jason D. Henderson, Mayor

The Village of Pleasantville is an Equal Opportunity Employer and is committed to excellence through diversity.

Employment Application

		4	Applic	cant Ir	nforma	ation			
Full Name:				·				Date:	
	Last			First			M.I.		
Address: Street Address								Apartment/Unit	#
	City						State	ZIP Code	
Phone:				E	mail				
Start Date Available: Desired Salary:									
Position App	olied for:								
Employment	Desired:		☐ Par	t Tim] Season	nal		
Are you a ci	YES NO YES re you a citizen of the United States? □ □ If no, are you authorized to work in the U.S.? □					NO			
Have you ever worked for this company?				NO	If yes, v	when?			
Are you a ve	YES NO In the your a veteran?								
If selected for employment, are you willing to submit to a background check?				NO					
to take a drug test?"									
Have you ever been convicted of a felony? If yes, explain:									
				Educa	ation		_		
High School	:			dress:					
From:	To:		ou grac	_	YES	NO	Diploma:		
College:			Ad	dress:_					
From:	To:	Did yo	ou grac	luate?	YES	NO	Degree:		
Other:			Ad	dress:	YES	NO			
From:	To:	Did yo	ou grad	luate?			Degree:		

References Please list three professional or business references. Full Name: Relationship: Company: Phone: Address: Full Name: Relationship: Phone: Company: Address: Full Name: Relationship: Phone: Company: Address: Previous Employment Company: Phone: Supervisor: Address: Ending Salary:\$ Job Title: Starting Salary:\$ Responsibilities: From: Reason for Leaving:____ To: YES NO May we contact your previous supervisor for a reference? Company: Phone: Address: Supervisor: Job Title: Starting Salary:\$ Ending Salary:\$ Responsibilities: From: _____ To:___ Reason for Leaving: YES NO May we contact your previous supervisor for a reference? Company: Phone: Address: Supervisor:____ Ending Salary:\$ Starting Salary:\$ Job Title: Responsibilities: From: _____ To:____ Reason for Leaving: YES NO May we contact your previous supervisor for a reference? П

	Military S	Service	
Branch:		From:	To:
Rank at Discharge:		Type of Discharge:	
If other than honorable, explain	n:		
	Disclaimer an	nd Signature	
I certify that my answers are	true and complete to the bes	t of my knowledge.	
If this application leads to eminterview may result in my re	nployment, I understand that f lease.	false or misleading informati	on in my application or
Signature:		D	ate:
	For Office	<u>Use Only</u>	
References Checked?	By Whom:		
Interviewed?	If yes, Interview date and	d by whom:	
Hired?	If yes, start date:		
Background Check?	Date completed:		
Drug Test?	Date completed:		