



# BOARDMAN TOWNSHIP

8299 Market Street  
Boardman, Ohio 44512  
P: 330.726.4177  
www.BoardmanTwp.com

## APPLICATION FOR EMPLOYMENT

(Please Fill Out Entirely in Type or Legible Print)

Date: \_\_\_\_\_ Position Title: \_\_\_\_\_

| APPLICANT INFORMATION   |        |        |
|---|--------|--------|
| Name:   |        |        |
| Address:  |        |        |
| City:   | State: | ZIP:   |
| Phone:  | Cell:  | Email: |
| Are you over 18 years old? : <input type="checkbox"/> Yes <input type="checkbox"/> No   |        |        |
| Are you a US Citizen or otherwise eligible to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No |        |        |
| Do you have any relatives employed by Boardman Township? <input type="checkbox"/> Yes <input type="checkbox"/> No                 |        |        |
| <i>If yes, who?</i>   |        |        |

| EDUCATION AND TRAINING  |                         |       |               |                         |
|-------------------------|-------------------------|-------|---------------|-------------------------|
|                         | School Name and Address | Major | Degree Earned | Highest Level Completed |
| High School             |                         |       |               |                         |
| College or Trade School |                         |       |               |                         |
| Graduate School         |                         |       |               |                         |
| Other                   |                         |       |               |                         |

| OTHER SKILLS  |
|---|
| Please list additional skills, specialized trainings, or certifications not already listed on this application: |
|   |


| REFERENCES  |         |       |            |
|---|---------|-------|------------|
| You must provide at least three (3) professional references. Do not list relatives. |         |       |            |
| Name  | Address | Phone | Occupation |
|   |         |       |            |
|   |         |       |            |
|   |         |       |            |

| EMPLOYMENT HISTORY   |                                     |
|--|-------------------------------------|
| <b>PRESENT OR LAST POSITION</b>  |                                     |
| Position Title:  | Dates of Employment: _____ to _____ |
| Company Name:  | Supervisor:                         |
| Job Duties:  |                                     |
| Reason for leaving:  | Salary or Wage: \$ _____            |
| May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                     |
| <b>SECOND LAST POSITION</b>  |                                     |
| Position Title:  | Dates of Employment: _____ to _____ |
| Company Name:  | Supervisor:                         |
| Job Duties:  |                                     |
| Reason for leaving:  | Salary or Wage: \$ _____            |
| May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                     |
| <b>THIRD LAST POSITION</b>   |                                     |
| Position Title:  | Dates of Employment: _____ to _____ |
| Company Name:  | Supervisor:                         |
| Job Duties:  |                                     |
| Reason for leaving:  | Salary or Wage: \$ _____            |
| May we contact this employer for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                     |

| MILITARY SERVICE (Optional)  |                                |
|--|--------------------------------|
| Have you had any military service in the U.S. Armed Forces? <input type="checkbox"/> Yes <input type="checkbox"/> No |                                |
| If Yes, Branch of Service:   | Service Period: _____ to _____ |
| Rank at Discharge:   | Division:                      |
| Principal Duties:  |                                |

**APPLICANT SIGNATURE**

I affirm that all answers I have made to each and all of the questions in this application are complete and true to the best of my knowledge and belief, and that intentional deception herein may be considered as sufficient cause for disqualification or dismissal if employed. As such, I do hereby authorize Boardman Township or its representative to complete a background investigation, including but not limited to a credit reference.

 **Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Refer to the position posting to determine where the application must be sent. Incorrectly received or incomplete applications will not be processed. This application will be kept on file for six (6) months by the department you are applying to.**

Revised: 8/19/2021