Application For Employment

Charter Township of Alpena 4385 US 23 N, Alpena, MI 49707 (989) 356-0297 We are an Equal Opportunity Employer and committed to excellence through diversity. Please print or type. The application must be fully completed to be considered. Please complete each section, even if you attach a resume.

Personal Information

Name								
Address		City	State	Zip				
Phone number		Email address						
Are you legally eligible to work in the US? Yes No		Are you a veteran? Yes No No						
If selected for employment are you willing to submit to a background check? Yes □ No □								
Position								
Position you are applying for		Available start date		Desired pay				
Employment desired	ull time	☐ Part time	☐ Seasonal/Temporary					
Education								
Education	l							
School name	Location	Years Completed	Degree received	Major				
	Location	Years Completed	Degree received	Major				
	Location	Years Completed	Degree received	Major				
School name	Location	Years Completed Job title	Degree received	Major Dates employed				
School name Employment	Location		Degree received					
Employment Employer (1)	Location	Job title	Degree received State	Dates employed				
Employment Employer (1) Work phone	Location	Job title Starting pay rate		Dates employed Ending pay rate				
Employment Employer (1) Work phone Address	Location	Job title Starting pay rate City		Dates employed Ending pay rate Zip				

Employer (3)	Job title	Job title	
Work phone	Starting pay rate	·	Ending pay rate
Address	City	State	Zip
References			
Reference (1)	Job title	Job title	
Work phone	Alternative Phone	Alternative Phone	
Address	City	State	Zip
Refernce (2)	Job title	Job title	
Work phone	Alternative Phone	Alternative Phone	
Address	City	State	Zip
Refernce (3)	Job title	Job title	
Work phone	Alternative Phone	Alternative Phone	
Address	City	State	Zip

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 employment being terminated.

Name (please print)	Sign	
Date		
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Charter Township of

