



City of

Tecumseh

**APPLICATION INFORMATION
FULL TIME/PART-TIME/SEASONAL EMPLOYEES**

The following is a summary of the application procedure:

1. The City of Tecumseh is an Equal Employment Opportunity Employer and is seeking applicants without regard to race.
 2. If hired, I understand that I will serve the City of Tecumseh and my employment and compensation can be terminated by the City of Tecumseh with or without notice, with or without cause, and at any time and for any reason.
 3. You must complete the application in full. The application is valid for a period of six months. All applications must be submitted to:
Personnel, City of Tecumseh, 309 E. Chicago Blvd., Tecumseh, MI 49286.
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I have read and understand the foregoing statements:

Applicant's Signature

Date

HOW TO FILE APPLICATION

This application must be filled out completely and delivered to Tecumseh City Hall at 309 E. Chicago Blvd., Tecumseh, MI 49286.

Please fill in this type ready pdf form, use ink or a typewriter. You may apply for one or all of the positions that are listed on the same announcement. However, a separate application must be completed for each position for which you wish to apply.

This application must be completed in full. Any falsification or fraudulent omission of any information in this application may be grounds for disqualification.

1. Name _____
Address _____
Phone Number _____

2. Position for which you are applying?

_____ One position per application.

3. Do you have the legal right to work in the U.S.?

_____ Yes _____ No

4. Are you 18 years or older?

_____ Yes _____ No

5. Have you ever worked under a different name?

_____ Yes _____ No

If answer is Yes, name(s) used so that employment can be verified.

6. Do you have a relative working for the City?

_____ Yes _____ No

7. Can you perform the duties of the job in which you wish to be employed, with or without accommodation?

_____ Yes _____ No

8. Have you ever been employed by the City of Tecumseh?

_____ Yes _____ No

If answer is Yes, fill in experience record below—use the back of this form if necessary.

From	To	Department	Position	Exact Nature of Duties

**List below your complete education and training.
COMPLETE ALL INFORMATION**

School Name	High School		GED	College/University		Graduate/Professional	
	9	10	Yes	1	2	1	2
Years completed (check)	11	12	No	3	4	3	4
Diploma/Degree							
Describe specialized training, skills, and extra-curricular activities							

9. What Professional or Occupational licenses do you hold?

10. What dates and times are you available for work?

Dates From: _____ To: _____
Days/Times: _____

List below all previous employers—start with your present or last job. DO NOT REPEAT EXPERIENCE ALREADY RECORDED. Use the back of this form if necessary.

Employer _____ Telephone _____
Address _____ City _____ State _____ Zip _____
Job Title _____ Dates Employed _____
Work Performed _____

Supervisor _____
Hourly Rate/Salary Starting _____ Hourly Rate/Salary Final _____
Reason for Leaving _____

Employer _____ Telephone _____
Address _____ City _____ State _____ Zip _____
Job Title _____ Dates Employed _____
Work Performed _____

Supervisor _____
Hourly Rate/Salary Starting _____ Hourly Rate/Salary Final _____
Reason for Leaving _____

Employer _____ Telephone _____
Address _____ City _____ State _____ Zip _____
Job Title _____ Dates Employed _____
Work Performed _____

Supervisor _____
Hourly Rate/Salary Starting _____ Hourly Rate/Salary Final _____
Reason for Leaving _____

11. Have you ever been convicted of a crime? _____ Yes _____ No

If yes, explain: _____

12. Are there any felony charges against you? _____ Yes _____ No

If yes, explain: _____

A 'YES' TO 11 OR 12 DOES NOT AUTOMATICALLY DISQUALIFY YOU FOR EMPLOYMENT.

**City of Tecumseh, Michigan
DECLARATION OF APPLICANT**

Read the following information carefully before signing. This form must be signed and dated in ink by the applicant.

AUTHORIZATION TO RELEASE INFORMATION

I authorize you to make such investigation and inquiries of my personal, employment, and financial history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.

I hereby affirm that there are no willful misrepresentations, omissions, or falsifications in the foregoing statements and answers. I am aware that should an investigation disclose any misrepresentation, omission, or falsifications, I may be disqualified in the examination, or, if I have already been hired, my employment may be terminated. I further certify that I have completed this application and this is my signature below.

Applicant's Signature

Date