Employment Application

CITY OF NORTON SHORES

4814 Henry Street Norton Shores, Michigan 49441
www.nortonshores.org
231-798-4391

I. GENERAL INFORMATION

Date _____

Name _____
(Last Name) (First Name) (Initial)

Address _____
(City) (State) (Zip)

Telephone Number (_____) _____ Email Address: _____

Position(s) applying for: _____

II. PERSONAL DATA

Are you at least 18 years old? Yes ❒ No ❒

Have you ever been convicted of a crime or are you presently charged with a felony? Yes ❒ No ❒
Please explain where, when and circumstances of any charges: _____

_____

_____

_____

Are you currently employed? Yes ❒ No ❒ When would you be available? _____

Are you legally eligible for employment in the United States? Yes ❒ No ❒

III. EDUCATIONAL BACKGROUND

Name & Address	Course	Total Years Attended	Last Year Attended	Diploma or Degree
High School				
College				
Other, Specify				

Do we have your permission to check your records at the above institutions? Yes ❒ No ❒

IV. EMPLOYMENT HISTORY

List all employers (even if submitting resume), beginning with your current or most recent.
Use additional pages if necessary.

1. Employer (Name, Address & Phone)	Duties and Responsibilities	From (Mo/Yr)	To (Mo/Yr)	Reason for Leaving
Position Held:		Starting Annual Salary	Last Annual Salary	Name of Supervisor
May we contact for reference? Yes ❒ No ❒		$	$	
2. Employer (Name, Address & Phone)	Duties and Responsibilities	From (Mo/Yr)	To (Mo/Yr)	Reason for Leaving
Position Held:		Starting Annual Salary	Last Annual Salary	Name of Supervisor
May we contact for reference? Yes ❒ No ❒		$	$	
3. Employer (Name, Address & Phone)	Duties and Responsibilities	From (Mo/Yr)	To (Mo/Yr)	Reason for Leaving
Position Held:		Starting Annual Salary	Last Annual Salary	Name of Supervisor
May we contact for reference? Yes ❒ No ❒		$	$	
4. Employer (Name, Address & Phone)	Duties and Responsibilities	From (Mo/Yr)	To (Mo/Yr)	Reason for Leaving
Position Held:		Starting Annual Salary	Last Annual Salary	Name of Supervisor
May we contact for reference? Yes ❒ No ❒		$	$	

V. MILITARY SERVICE

Were you in the U.S. Armed Forces or National Guard? Yes ☐ No ☐ If yes, what branch? _____

Dates of Duty: From _____ To _____
Month Year Month Year

Rank at discharge: _____ List duties in service, including special training: _____

_____

VI. PERSONAL REFERENCES - List three references not related to you.

Name and Occupation	Telephone	Years Known
1.	(_____)	
2.	(_____)	
3.	(_____)	

VII. ADDITIONAL INFORMATION

Other skills, experiences, licenses, certifications or training which you feel would especially qualify you for work with the City of Norton Shores. _____

_____

_____

_____

Do you have any relatives currently employed by the City of Norton Shores (including City Council members)?

Yes ☐ No ☐ If yes, name _____ relationship _____

The facts set forth in my application for employment are true and complete. I understand that if employed, any misrepresentations or omissions made by me on this application shall be sufficient cause for dismissal from the employer's service, whenever it is discovered.

The City of Norton Shores is an equal opportunity employer. All qualified applicants will receive consideration for employment without regard to race, color, religion, gender, disability, national origin or other legally protected characteristics.

(over)

READ CAREFULLY AND SIGN BELOW IF YOU AGREE TO THESE TERMS OF EMPLOYMENT

I affirm that all statements I have made on this employment application are true and complete. I understand that any false or misleading statements or material omissions may result in the denial of employment or, if I am employed, in the termination of my employment.

I agree that my employment with the City of Norton Shores will be at will and may be terminated by me or the company at any time, with or without cause and with or without notice. I agree that no one other than the City Administrator of the City, in a written form, has any authority to limit the City's right to terminate employment at will, or to offer employment other than on an at-will basis.

I agree that I will not disclose to anyone or use for my own purposes any of the City's confidential or proprietary information, either during or after my employment, except at the request and for the benefit of the City. I agree that information about the City's customers, vendors, sources of supply, pricing, costs, and other financial information, products, services, methods of operation, marketing, engineering methods, production, and the like is confidential and proprietary information that belongs to the City. If my employment with the City ends, I will not retain any copies or summaries of any such information, but will promptly return all such information to the City.

I agree to submit to physical examinations permitted by law before and during my employment, at the request and expense of the City, and I agree to disclose all information lawfully requested at such examinations about my physical and mental condition and medical history. I also agree that before and during my employment, at the request and expense of the City, I will cooperate in such lawful medical tests (including blood, urine or other testing) as the City requests to check for drugs or alcohol in my system. I waive any claims against the City or its agents or any testing agency retained by the City or its agents relating to any such testing, or from lawful decisions made regarding my employment or termination of employment based upon the results of such testing or analysis.

I agree that except as prohibited by law the City may, during or after my employment, disclose or discuss any information or opinions relating to me or my employment to employees of the City or third parties. I waive written or other notice of any such disclosure, including disclosure of disciplinary matters, and I waive any claims against the City or its agents relating to any such disclosure or discussion.

I agree that I will not commence any action or lawsuit relating to my employment or application for employment with the City of Norton Shores more than 6 months after the employment action that is the subject of the action or lawsuit, and I agree to waive any statute of limitations to the contrary. I understand that this means that even if the law would give me the right to wait a longer time to make a claim, I am freely and knowingly waiving that right, and that any claims not brought within 6 months after the relevant employment action will be barred.

I agree to the above terms of employment. I agree that if any of the above terms is ever found to be legally unenforceable as written, such invalidity will not affect the validity of the rest of this agreement, and such term shall be limited to allow its enforcement as far as legally possible. I agree that no one other than the City Administrator, by a written directive, has any authority to modify the above terms of employment, or to make any exception to them, or to offer employment on any other terms.

I agree that I will be bound by and will adhere to any other rules and policies issued by the City, including all rules and policies contained in the City's employee handbook and personnel ordinance.

I understand that it is the policy of the City of Norton Shores to verify employment eligibility, including social security numbers, for all employees.

Date_____ Signature of Applicant _____