

Received Date	Time
BY	



CITY OF NORWOOD

Employment Application

APPLICANT INFORMATION										
Last Name					First				M. I.	
Street Address							Apartment/Unit #			
City				State			ZIP			
Home Phone			Work Phone				Mobile Phone			
Email										
Date of Birth			Position Applied for							
Have you ever Applied for a job with the City of Norwood?	YES	NO	<input type="checkbox"/>	(Explain)						
Have you ever Worked for the City of Norwood?	YES	NO	<input type="checkbox"/>	(Explain)						
Has the Norwood Civil Service Commission ever rejected your application?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>						
(If Yes, Why?)										
Are you 21 years of age?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Do you have a valid Driver's License?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	State:
Military Veteran's Credit	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	20% Credit	Attach DD214				
Four Year College Degree	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	10% Credit	Attach Degree - Certificate				
Two Year College Degree	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	5% Credit	Attach Degree - Certificate				
Ohio Certified Police Officer Firefighter II/EMT-Paramedic	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	10% Credit	Attach Certification				
Firefighter I / EMT-Basic	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	5% Credit	Attach Certification				
Other State Certified Police Officer/ Norwood Auxiliary	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	5% Credit	Attach Certification				

EDUCATION													
High School					Address								
From		To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	G. E. D.	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
College					Address								
From		To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
Other					Address								
From		To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				
Other					Address								
From		To		Did you graduate?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	Degree				

EDUCATION continued

What were your major fields in college?

List any SPECIAL COURSES you have completed, such as: night school, manpower training programs, correspondence courses, courses with the Armed Forces, business college, etc., which would help you to qualify for the position applied for:

COURSES	SCHOOL	NUMBER OF CREDIT HOURS (semester or quarter credits)

CONVICTIONS

Have you ever been convicted of a local, state, or federal offense?
(NOTE: A record of convictions is not an automatic bar to employment) If the answer to this question is a YES, explain in the REMARKS section YES NO

REMARKS: Use this space for any further information that will be helpful in evaluating your application, such as: job related volunteer work and hobbies. Attach an additional sheet if needed. (For CONVICTION Records: list when, where, and for what. Attach additional paper if needed)

References (Please list three)

Full Name		Phone	
Company			
Address		Relationship	
Full Name		Phone	
Company			
Address		Relationship	
Full Name		Phone	
Company			
Address			

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

PREVIOUS EMPLOYMENT continued

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

APPLICANT'S CERTIFICATE AND RELEASE

All information provided by me in support of my application for employment is true and correct to the best of my knowledge. I understand that misrepresentations or omissions may be cause for rejection, or may be cause for subsequent dismissal if I am hired. I hereby authorize any present or former employer, person, firm, corporation, or government agency to answer any and all questions and to release or provide any information within their knowledge or records. I agree to hold any and all of them blameless and free of any liability for releasing any truthful information that is within their knowledge or records.

Signature		Date	
Address			

FAIR CREDIT REPORTING ACT DISCLOSURE FORM



Certain amendments to the Fair Credit Reporting Act, effective September 30, 1997, impose upon Employers certain disclosure obligations when it is contemplated that certain consumer reports will be utilized. Therefore, in accordance with the Fair Credit Reporting Act, you are hereby advised of the following:

1. You are hereby advised that a Consumer Report or an Investigative Consumer Report may be requested from a Consumer Reporting Agency about you. An Investigative Consumer Report may include information about your character, general reputation, personal characteristics and mode of living.
2. If an Investigative Consumer Report is requested, you have the right to obtain a complete and accurate statement of the nature and scope of the investigation and to be generally advised of your consumer rights under the Fair Credit Reporting Act.
3. If adverse action is contemplated based upon a Consumer Report of Investigative Consumer Report, you will be provided additional notices and information.

FAIR CREDIT REPORTING ACT ACKNOWLEDGEMENT AND AUTHORIZATION

I hereby authorize Norwood, Ohio or its authorized agents, to conduct a thorough investigation of me during the course of the Employment Application process including, without limitation, information concerning my prior employment positions, criminal background, educational background, and personal history. This authorization specifically includes Consumer Reports and Investigative Consumer Reports.

I hereby acknowledge receipt of a Fair Credit Reporting Act Disclosure Form which has fully advised me of my rights under the Fair Credit Reporting Act.

Applicant signature: _____

Applicant name: _____ **Date:** _____