



Employment Application



NORWICH TOWNSHIP

Applicant Name

Position Applying for: _____

Please Mail or Drop Off Your Completed Application to:

**Norwich Township
Administrative Offices
5181 Northwest Parkway
Hilliard, Ohio 43026**

Norwich Township is an equal opportunity employer. It is the policy of Norwich Township to ensure equal opportunity in accordance with all applicable Federal and State laws, rules, regulations and guidelines. Discrimination against employees and applicants due to race, color, religion, sex, national origin, disability, age, veteran's status or any other legally protected status is illegal and violates the Township's equal opportunity policy.

Starting with the most recent employer, please provide the following information

Employment History							
Dates Employed:	Month	Year	to	Month	Year	Starting Wages:	Final Wages:
Employer:						Phone:	
Street Address:							
City:			State:			Zip Code:	
Starting Job Title:				Finishing Job Title:			
Immediate Supervisor and title (for most recent position held)						May we contact for job reference?	
						Yes No	
						Later	
Summarize the type of work performed and job responsibilities.							

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Employer:						Phone:	
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Starting Job Title:				Finishing Job Title:			
Immediate Supervisor and title (for most recent position held)						May we contact for job reference?	
						Yes No	
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Employer:						Phone:	
Street Address:							
City:			State:			Zip Code:	
Starting Job Title:				Finishing Job Title:			
Immediate Supervisor and title (for most recent position held)						May we contact for job reference?	
						Yes No	
						Later	
Summarize the type of work performed and job responsibilities.							

Employment History (continued)

Explain any gaps in your employment, other than those due to personal illness, injury and disability _____

Have you ever been fired or asked to resign from a job? No Yes (please explain) _____

References

List name and telephone number of three (3) business/work references who are *NOT* related to you and are *NOT* previous supervisors. If not applicable, list three (3) school or personal references that are *NOT* related to you.

Name	Title	Relationship to You	Phone	Years Known
1.				
2.				
3.				

Educational Background

Starting with the most recent school attended, please provide the following information

School (include City and State)	Years Complet- ed	Completed (Diploma, GED, Degree, Certificate)
1.		
2.		
3.		
4.		
5.		

Please Initial Both Statements Below

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I also understand and agree that my employment with **Norwich Township** is strictly voluntary and at-will on both sides, and may be terminated either by me or **Norwich Township**, at any time, with or without notice, with or without cause or reason. This mutual at-will relationship can only be changed in writing, signed by the Board of Trustees and me. I acknowledge that no promises or representations inconsistent with this at-will relationship have been made to me. I also acknowledge that no future statements interpreted by me as promises or representations inconsistent with this at-will relationship are binding, and that this at-will relationship is the final and binding term of my employment with **Norwich Township**. My signature below indicates that this is the complete agreement between Norwich Township and me.

I verify that all information which I have provided on this application is true and factual.

Date _____

Print Name _____

Signature _____