



POSITION APPLIED FOR: (job title) _____

APPLICATION FOR EMPLOYMENT

City of Richmond Heights Ohio is an equal opportunity employer. City of Richmond Heights does not discriminate in employment regarding race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service or any other characteristic protected by law.

Request Assistance

If you are a qualified individual with a disability or a disabled veteran, you may request a reasonable accommodation if you are unable or limited in your ability to access job openings or apply for a job on this site because of your disability. You can request reasonable accommodations by contacting Human Resources at 216-486-2474.

PERSONAL INFORMATION

Incomplete information could disqualify you from further consideration. Please complete all fields.

Name _____ **Date** _____

Last

First,

Middle

Home Address _____

Street Address

Apt./Suite

City, State, and Zip _____

E-mail Address (required) _____

Home Phone # _____ **Mobile Phone #** _____

Are you eligible to work in the U.S? Yes No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)
 Yes No

Have you ever been terminated from employment or asked to resign by an employer? Yes
 No

If yes, please provide company names and details. _____

Can you work any shift? Yes No If no, explain: _____

Can you work overtime, including weekends? Yes No

Are you able to perform the essential functions of the job for which you are applying, with or without a reasonable accommodation? Yes No

Do you have a valid driver's license? Yes No If no, explain. _____

Hourly rate/Salary desired. _____

Are you currently employed? If so, may we inquire of your present employer? _____

Have you ever worked for the City of Richmond Heights before? Yes No If yes, explain _____

Do you know anyone who works for the City of Richmond Heights? Yes No If yes, who? _____

EDUCATION	Name and location of school	Degree Received	Subjects studied/Major
High School			
College or University			
Trade, Business or Correspondence School			
Certifications/Other			

EMPLOYMENT HISTORY Include your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete information could disqualify you from further consideration.*

From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

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Job Title		Address	
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From	To	Employer Name	Telephone
Job Title		Address	
Immediate supervisor and title		Summarize the nature of work performed and job responsibilities	
Reason for leaving			

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

REFERENCES

Give the names of three persons (two professional, one personal) not related to you, whom you have known at least three (3) years.

Name	Address, Phone, Email	Company	Years Acquainted
1			
2			
3			

Are you available to work (please indicate)?

- Full time: (1st 2nd 3rd shift)
- Part Time: Mornings Afternoons Evenings
- Seasonal: Please indicate dates available ____/____/____ - ____/____/____

How did you hear of our opening? City employee referral City website

job board social media advertisement (print/radio/TV) recruiter

other, please explain:

Please read carefully before signing.

I understand that neither the completion of this application nor any other part of my consideration for employment establishes any obligation for City of Richmond Heights, Ohio to hire me.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written documents or by conduct unless such change is specifically acknowledged in writing by an authorized executive of the City. I understand that no representative of City of Richmond Heights has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to City of Richmond Heights true and complete information on this application. No requested information has been concealed. I authorize the City of Richmond Heights to contact references provided for employment reference checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

Printed Name: _____

Signature: _____ Date: _____

THIS APPLICATION IS VALID ONLY FOR 60 DAYS FROM THE DATE ABOVE.