

232 W. Main Street PO Box 305 Russia, OH 45363 PH: (937) 526-4436

FX: (937) 326-4436 FX: (937) 799-0003 fiscalofficer@russiaoh.com

## APPLICATION FOR EMPLOYMENT - PART TIME VILLAGE ADMINISTRATOR

(PRE-EMPLOYMENT QUESTIONNAIRE)

(AN EQUAL OPPORTUNITY EMPLOYER)

PERSONAL	INFORMATION			Date	
Name					
Last		First	Middle		
Address:					
	Street	City	State		Zip
Phone Number:		Are you 18 year	rs or older? (Circle yes	s or no) Yes	No
Email Address:					· · · · · · · · · · · · · · · · · · ·
Are you legally e (Proof of identity and elig	ligible to be employed in the United States? jibility will be required upon employment)	(Circle yes or no)	Yes	No	
EMPLOYME	NT INFORMATION				
Are you presentl	y employed? (Circle yes or no) Yes	<b>No</b> If ye	s, may we contact you	ur employer? Yes	No
Have you ever b	een terminated from employment or asked t	to resign by an em	plover? Yes	No	
·	, ,	0 ,			
If yes, please pro	ovide company name(s) and details				
					· · · · · · · · · · · · · · · · · · ·
	For	mer Employers			
		employers, starting with	n last one first)		
Dates	Name and Address		<b></b>	Reason for	
Employed From	of Employer		Position	Leaving	
То			Phone #		
From					
То			Phone #	<b>I</b>	
From					
То			Phone #		
	1		<u>I</u>		
EDUCATION					
	Name and Location of School		Number of Years	Did you Grad	duate?
High School					
College and/or Trade School					

Name	Address		Phone #	Position & Business	Years Acquainted	d
1					_	
2						
GENERAL						
Do you have basic compu	iter knowledge?	Yes No				
Do you have any purchas	ing experience?	Yes No				
Do you have any grant wr	iting experience?	Yes No				
Do you have any supervis	sory experience?	Yes No				
RECORD OF CONV	ICTION					
Have you ever been conv	icted of a felony?	Yes N	lo			
If yes, please explain and	provide dates and	locations for all con	victions:			_
(A conviction will not necessarily and rehabilitation will be conside		you for employment. Ra	other, such factors as age and	d date of conviction, serious	ness and nature of the	 he crime
PHYSICAL RECORD	)					
Do you have any physical	limitations that res	trict you from perfor	ming any work for which	ch are you being consi	dered? Yes	No
If yes, please describe: _						
						<u> </u>
**Please attach resur	ne or letter desc	cribing your prev	ious experience			
EMERGENCY CONT	TACT INFORM	ATION:				
IN CASE OF EMERGENO	OV NOTIEV					
IN CASE OF ENIERGEN		ime	Address		Phone #	

## APPLICANT CONSENT AND AGREEMENT:

The Village of Russia is an equal opportunity employer. We do not discriminate in employment on account of race, color, religion, gender, sexual orientation, pregnancy, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws.

"I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and authorize the Village of Russia to verify the accuracy and to obtain reference information of my work performance. I hereby release the Village of Russia from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules and regulations of employment for the Village of Russia. However, I further understand that neither the policies, rules, and regulations of employment or anything said during the interview process shall be deemed to constitute the terms of an implied employment contract.

I agree that any claim or lawsuit relating to my service with the village of Russia must be filed no more than 6 months after the date
of the employment action that is the subject of the claim or lawsuit. I waive any statute of limitations to the contrary."

Date

THIS APPLICATION IS VALID ONLY FOR 90 DAYS FROM THE DATE SIGNED/DATED ABOVE.

Signature of Applicant