HILLSDALE COUNTY ROAD COMMISSION

APPLICATION FOR EMPLOYMENT

Careful and thoughtful completion of this application is an important step in our consideration of individuals for employment. Please complete the entire application. Please make sure your application can be read by others. Filling out an application does not imply you will be interviewed or hired, but you will be considered for the position you are applying for. If you are offered employment, it will be necessary for you to have a physical examination, including drug screen, by our company doctor the results of which must be satisfactory to our organization.

Applicants are considered for all positions, when vacancies occur, without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of a medical condition or handicap. AN EQUAL OPPORTUNITY EMPLOYER M/F/V/H.

(PLEASE PRINT) Date of Application:_____

Position(s) applying for _____

Name _____
Last First Middle

Address _____
Number Street City State Zip

Telephone ( )_____ - _____ Social Security No. _____ - _____ - _____

If you've worked under another name(s), _____
Indicate

Other residences during past 10 years:

MONTH & YEAR	STREET ADDRESS	CITY	STATE

Are you at least 18 years or older? Yes ☐ No ☐

Are you a U.S. citizen? Yes ☐ No ☐

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes ☐ No ☐

A Commercial driver's license is required for certain positions by law.

Driver's License #_____ State:_____ CDL Type:_____

CDL Endorsements:_____

Is your driver's license valid? Yes ☐ No ☐ Expiration Date_____

Name(s) of relative(s) already employed by HCRC?_____

_____

List anyone you know who works for us _____

Have you ever been employed by HCRC? _____ If yes, when? _____

Are you employed now? _____ May we contact your employer? _____

Have you ever been the recipient of unemployment benefits? _____

If yes, explain why and when? _____

Have you received a disciplinary suspension or been discharged from any employment position(s) within the last four years? Yes ☐ No ☐

If yes, explain _____

Have you ever received any traffic violations? Yes ☐ No ☐

If yes, when and nature of offense? _____

Have you ever been convicted of a crime? Yes ☐ No ☐

If yes, when, where and nature of offense? _____

_____

Are there any felony charges pending against you? Yes ☐ No ☐

If yes, when, where and nature of offense? _____

_____

Veteran of the U.S. Military service? Yes ☐ No ☐ Branch_____

If yes, what type of discharge did you receive? _____

EMPLOYMENT EXPERIENCE: Start with your present or last job. Include military service assignments. Exclude organization names which indicate race, color, religion, sex or national origin.

1.	Employer	Phone	Dates Employed From To	Work Performed
	Address			
	Job Title		Hr. Rate/Salary Start Final	
	Supervisor			
	Reason for leaving			
2.	Employer	Phone	Dates Employed From To	Work Performed
	Address			
	Job Title		Hr. Rate/Salary Start Final	
	Supervisor			
	Reason for leaving			
3.	Employer	Phone	Dates Employed From To	Work Performed
	Address			
	Job Title		Hr. Rate/Salary Start Final	
	Supervisor			
	Reason for leaving			
4.	Employer	Phone	Dates Employed From To	Work Performed
	Address			
	Job Title		Hr. Rate/Salary Start Final	
	Supervisor			
	Reason for leaving			

Summarize special skills and qualifications: _____

_____

_____

_____

On what date are you available for work? ______________________________

Available to work: Full-time ☐ Part-time ☐ Temporary ☐

Are you on a lay-off and subject to recall? Yes ☐ No ☐

Check the positions you feel qualified for:

Laborer	☐	Mechanic	☐
Light Truck Driver	☐	Supervisor	☐
Heavy Equip. Operator	☐	Engineering/Inspection	☐
Heavy Truck Driver	☐	Office Work	☐

Other (specify) ______________________________

EDUCATION	SCHOOL NAME & LOCATION	COURSES TAKEN OR MAJOR	YEARS COMPLETED	GRADUATED YES/NO
High School				
Trade/Voc. School				
College				

* *

If applying for an office position, please complete these questions:

Typing Speed ____WPM Speedwriting/Shorthand Speed ____________________

Software applications proficient in? ______________________________

List equipment or office machines you can operate: ______________________________

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* *

Can you safely and efficiently perform all of the essential job functions according to the job description for the position for which you are applying? Yes ☐ No ☐

If no, please explain: ______________________________

____

Please give three character references WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS EMPLOYERS:

NAME	YEARS KNOWN	ADDRESS	PHONE NUMBER WHERE REFERENCE CAN BE REACHED DURING DAY

APPLICANT'S CERTIFICATION AND AGREEMENT

1. Certification of Truthfulness. I certify that all statements on this Application for Employment are made truthfully and without evasion, and further understand and agree that such statements may be investigated, and if found to be false, will be sufficient reason for not being employed or if employed will result in my dismissal.

2. Authorization for Employment/Educational Information. I authorize the references listed in the Application for Employment, and any prior employer, educational institution, or any other persons or organizations to give the Hillsdale County Road Commission any and all information, or any other pertinent information, they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing any lawful information to the Hillsdale County Road Commission. I hereby waive written notice that employment information is being provided by any person or organization.

3. Employment at Will. If I am hired, in consideration of my employment, I agree to abide by the rules and policies of the Hillsdale County Road Commission, including any change made from time to time, and agree that, subject to the provisions of any written agreement to the contrary, my employment and compensation can be terminated with or without cause, and with or without notice, at any time, at the option of either the Hillsdale County Road Commission or myself. I understand that no manager or other representative of the Hillsdale County Road Commission, other than the Engineer-Manager, has any authority to enter into any agreement for employment for any specific or indefinite period of time, or to make any agreement contrary to the foregoing. Any such agreement made by the Engineer-Manager must be made in writing to be effective.

4. Authorization to Work. If I am selected for hire, I will be offered employment provided I verify that I am authorized to work as required by the Immigration Reform and Control Act of 1986.

5. Need for Accommodation. If I am a person with a disability who requires an accommodation to perform the job, I must notify the County Road Commission of that need within 182 days after I knew or reasonably should have known that an accommodation was needed. Failure to do so will bar me under state but not federal law from alleging that the Hillsdale County Road Commission has not accommodated me as required by law.

6. Criminal Records Check. I agree to execute an authorization for the Hillsdale County Road Commission to secure criminal conviction history from the appropriate law enforcement agency should the Hillsdale County Road Commission determine it is necessary to do so.

7. Release of Medical Information. I authorize every medical doctor, physician or other healthcare provider to provide any and all information, including but not limited to, all medical reports, laboratory reports, x-rays or clinical abstracts relating to my previous health history or employment in connection with any examination, consultation, test or evaluation. I hereby release every medical doctor, healthcare personnel and every other person, firm, officer, corporation, association, organization or institute which shall comply with the authorization or request made in this respect from any and all liability. I understand that this release will not be sent to my physician or other healthcare provider until a job offer has been made.

8. Physical Exam and Drug and Alcohol Testing. I agree that if a job offer is made to me I will, before commencing employment, take a physical exam and authorize the Hillsdale County Road Commission or its designated agent(s) to withdraw specimen(s) of my blood, urine or hair for chemical analysis. One purpose of this analysis is to determine or exclude the presence of alcohol, drugs, or other substances. I understand the decisions concerning my employment will be made as a result of this test. I further authorize any physician or entity conducting such testing to release the results of such testing to the Hillsdale County Road Commission.

9. Protected Disability. I also understand that if I have a protected disability that affects my ability to perform the job I seek, I may ask the County Road Commission to attempt to make a reasonable accommodation for it. I must make my request in writing to the personnel department as soon as possible after the date I know that accommodation is needed.

10. Driving Record Check. If applying for a position that requires driving a Hillsdale County Road Commission vehicle, I authorize the County Road Commission and its agents the authority to make investigations and inquiries of my driving record.

11. Fringe Benefits. In accepting employment with the Hillsdale County Road Commission, I agree to accept all fringe benefits when eligible as provided now or in the future, including any changes made from time to time. I understand that it is my responsibility to provide documentation for verification of eligibility for fringe benefits as well as information regarding mailing address, telephone numbers or contact arrangements, withholding exemptions and dependent information. The Hillsdale County Road Commission shall rely on the most recent information for all purposes.

12. Consideration of Employment. I understand that my Application will be considered pursuant to the Hillsdale County Road Commission's normal procedures for a period of 180 days. If I am still interested in employment thereafter, I must reapply.

I HAVE READ AND UNDERSTAND ITEMS #1 THROUGH #12, AND ACKNOWLEDGE THAT WITH MY SIGNATURE BELOW.

_____ _____

Signature of Applicant Date