



VILLAGE OF GRANVILLE

Application for Employment

The Village of Granville appreciates your interest in applying for employment. Thank you for taking the time to complete this application.

The Village of Granville is an Equal Opportunity Employer. Applicants for all job openings are welcome and considered without regard to race, color, religion, national origin, sex, age, veteran status, physical or mental disability or any other basis protected by state, federal or local law. This list is not exhaustive of the grounds on which discrimination is prohibited. It is the intent of the Village of Granville to comply with all applicable federal, state and local legislation regarding equal opportunity in employment. This application does not permit the release or use of disability-related or medical information in a manner prohibited by the American with Disabilities Act (ADA) and other relevant federal and state laws.

PERSONAL INFORMATION

Name (Please print or type) _____

Address _____ City/State/Zip _____

Home Phone # _____ Other _____

Email _____ Social Security # _____

Position desired _____ Date available _____

Are you legally eligible for employment in the United States? Yes No

If hired, you are required to submit proof of your eligibility to work in the United States.

Are you over the age of eighteen? Yes No If no, hire is subject to verification of minimum legal age.

Have you worked for the Village previously? Yes No If yes, when and in what capacity? _____

Are you physically able to perform the essential functions of this job? Yes No

If no, is there an accommodation that can be provided that would enable you to perform the essential functions? Please explain.

EDUCATION & TRAINING

Education	Name/Location of School	Degree(s) & Major(s)	Did You Graduate?
High School	_____ _____		Yes <input type="checkbox"/> No <input type="checkbox"/>
College/University	_____ _____		Yes <input type="checkbox"/> No <input type="checkbox"/>
Other	_____ _____		Yes <input type="checkbox"/> No <input type="checkbox"/>

LICENSES, CERTIFICATIONS, REGISTRATIONS

I possess: a valid driver's license _____ state and license # a valid commercial driver's license _____ state and license #

Professional / Technical Licenses and Registrations

Type	State	Number	Expiration Date (if any)

MILITARY SERVICE

Were you in the U. S. Armed Forces? Yes No If yes, what branch? _____

Rank _____ Are you a member of the Military Reserves? Yes No

ADDITIONAL TRAINING, AWARDS, HONORS & ACHIEVEMENTS

Please list any additional trainings, awards, honors, achievements or other qualifications relevant to your previous positions for the past five (5) years.

EMPLOYMENT HISTORY

List your work experience starting with your current/most recent employer. Please include all employment. You may attach a resume, but a resume may not be substituted for completing this section. You may attach additional pages, if necessary.

Current/Most Recent Employer		Address			
Job Title		Supervisor's Name		Telephone Number	
Date Employed (mo/yr)	Date Separated (mo/yr)	Reason for Leaving			
Current Salary	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Did you supervise others? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, number supervised.	May We Contact Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
List duties and describe work:					

Previous Employer		Address			
Job Title		Supervisor's Name		Telephone Number	
Date Employed (mo/yr)	Date Separated (mo/yr)	Reason for Leaving			
Current Salary	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Did you supervise others? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, number supervised.	May We Contact Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
List duties and describe work:					

Previous Employer		Address			
Job Title		Supervisor's Name		Telephone Number	
Date Employed (mo/yr)	Date Separated (mo/yr)	Reason for Leaving			
Current Salary	Full-time <input type="checkbox"/> Part-time <input type="checkbox"/>	Did you supervise others? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, number supervised.	May We Contact Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
List duties and describe work:					

REFERENCES

Please provide three references, other than relatives or previous employers, who we may contact.

Name	Type of Reference (personal, professional)	Address	Phone Number (with area code)

CERTIFICATION AND STATEMENT OF UNDERSTANDING

I certify that all of the information furnished in this employment application and its addenda is true and complete to the best of my knowledge. I understand that the Village of Granville may investigate the information I have furnished and I realize that any misrepresentation or false information in this application may lead to withdrawal of any employment offer or termination after employment.

Signature

Date

ACKNOWLEDGEMENT & RELEASE

I hereby acknowledge that I, voluntarily and of my own free will, have applied for employment with the Village of Granville with the understanding that the Village may use a variety of screening procedures to evaluate my qualifications and suitability for employment. I have been advised that these screening procedures may include, but are not limited to, interviews, criminal record checks, driving record checks, written testing, reference checks, background investigations, as well as post-offer psychological evaluations, medical examinations and drug testing. I acknowledge that I may also be subject to other screening procedures, not specifically listed above. I further acknowledge that any such screening procedures, as reasonably required by the Village of Granville, are a prerequisite to my employment with the Village.

In addition, I also hereby understand that the Village of Granville cannot guarantee the confidentiality of the results of, or information obtained through, the aforementioned screening procedures. Ruling by the Ohio Supreme Court relative to the Public Records Act indicate that, with certain enumerated exceptions, records maintained by a governmental entity are a matter of public record and, should a proper request be made by a member of the public for such records, the governmental entity would be required to make such records available to that member of the public within a reasonable period of time. Employment-related documents, with the exception of medical records, maintained by the Village do not appear to fall within any of the enumerated exceptions.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the Village of Granville is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time for any reason, except as otherwise determined by the Charter and Ordinances of the Village of Granville or applicable law. It is further understood that this "at will" employment relationship may not be changed by any written document or contract unless such a change is specifically acknowledged in writing by the authorized executive of the Village.

Therefore, in consideration of my employment application being reviewed and considered by the Village of Granville, I, being at least 18 years of age and under no legal disability on behalf of my heirs and assigns, hereby release and agree to hold harmless the Village of Granville and any of its agents, employees, or related officials from any and all liability, whatever the type and nature, resulting from the administration of any such screening procedures and/or the release of the results.

Signature

Date



VILLAGE OF GRANVILLE

FAIR CREDIT REPORTING ACT

DISCLOSURE & AUTHORIZATION FOR USE OF CONSUMER REPORTS

The Village of Granville (Granville) in accordance with the amended Fair Credit Reporting Act ("FCRA"), is advising you that it may obtain "Consumer Reports" from a Consumer Reporting Agency ("CRA") about you when considering your application for employment, when deciding whether to continue your employment (if you are hired), and when making other employment-related decisions concerning you. As a prospective or current employee of Granville, you are a "Consumer" as defined in the FCRA, with certain "consumer" rights. Those Consumer Reports, as defined in the FCRA, may include information concerning your "credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living." Granville also may seek information concerning your employment history, motor vehicle record, education background, and/or criminal record.

Granville may obtain "Investigative Consumer Reports" from a CRA which may be obtained through personal interviews with your neighbors, friends or associates who may have knowledge concerning your "credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living." You may request disclosure of the nature and scope of the investigation in writing within a reasonable period of time.

Granville may rely on any or all of the above-referenced information when making an employment decision that directly affects you. If Granville contemplates making an employment decision that adversely affects you based, in whole or in part, upon information obtained from a CRA, you will be provided additional notices and information.

NOTICE & AUTHORIZATION OF USE OF INVESTIGATIVE CONSUMER REPORTS

I have read the above-referenced FCRA Disclosure and hereby voluntarily authorize Granville or its authorized agents, to conduct a thorough investigation of me including, without limitation, obtaining Consumer Reports, including Investigative Consumer Reports, about me from a CRA and to consider the Consumer Reports when making employment-related decisions about me. Those Consumer Reports, as defined in the FCRA, may include any or all of the following information concerning my "credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living." I also authorize Granville to obtain information concerning my employment history, motor vehicle record, educational background, and/or criminal record. The Reports also may be obtained through personal interviews with my neighbors, friends or associates. If I am hired, this authorization shall remain on file and shall serve as ongoing authorization for Granville to obtain "Consumer Reports" and/or "Investigative Consumer Reports" from a CRA at any time during my Granville employment. I also acknowledge receiving a written summary of my rights under the amended Fair Credit Reporting Act.

ACKNOWLEDGEMENT

Signature of Applicant/Employee

Name of Applicant/Employee (printed)

Applicant/Employee Social Security Number

Date

SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT

The Federal Fair Credit Reporting act (FCRA) promotes the accuracy, fitness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave., Washington, DC 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment - or to take another adverse action against you - must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 1. a person has taken adverse action against you because of information in your credit report;
 2. you are the victim of identity theft and place a fraud alert in your file;
 3. your file contains inaccurate information as a result of fraud;
 4. you are on public assistance;
 5. you are employed but expect to apply for employment within 60 days.

In addition, all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from a CRA that creates scores or distributes scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the CRA, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation.
- **Consumer reporting agencies must correct/delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a CRA may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identify theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 1-800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051

PRE-EMPLOYMENT DRUG TESTING CONSENT

I understand that, as a candidate for employment with the Village of Granville, I must, in order to be appointed to a position with the Village of Granville, voluntarily consent to and pass a drug screening to detect the presence of drugs in my system. I also understand that I will not actually be administered such a test until I have received a conditional offer of employment. I further understand that my application for employment will be rejected if I decline to sign this consent and thereby declined to be tested, if my test results are confirmed to be positive for the presence of illegal drugs or legal drugs for which I cannot submit sufficient proof that such drugs were legally obtained and used, or if masking agents are detected in any specimen I provide as part of the testing procedure.

I hereby knowingly and voluntarily consent to participate in a substance abuse screening and authorize the Village of Granville to conduct, through its designated testing laboratory or other licenses/certified medical professionals/technicians, said screening. In addition, I authorize the designated testing laboratory or other licensed/certified medical professionals/technicians to release any and all information regarding the test(s) including results, to the Village of Granville and its representative. I further release the Village of Granville, its officers, directors, employees, agents, representatives from any and all claims, suits, causes of action, liability and damages arising from my submitting to the test(s) and from the information obtained from the test(s).

Signature of Applicant/Employee

Name of Applicant/Employee (printed)

Date

Signature of Applicant/Employee

Name of Applicant/Employee (printed)

Date