

EMPLOYMENT / VOLUNTEER HISTORY

Employer	Telephone ()	Dates Employed		Summarize the work performed and job responsibilities:
Job Title		From	To	
Immediate Supervisor and Title		Hourly Rate/Salary		
May we contact for reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		\$	Per	

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Skills and Qualifications. Summarize special skills and qualifications acquired from employment or other experiences that may qualify you to work for the Village of Mansfield.

EDUCATIONAL BACKGROUND / REFERENCES

School	Number Years Completed	Degree Diploma	GPA Class Rank	Major	Minor

REFERENCES

List name and telephone number of three business or work references who are not related to you and are not previous supervisors. If not applicable, list three school or personal references who are not related to you.

Name	Telephone	Years Known

List special accomplishments, publications, awards (exclude information which would reveal sex, race, religion, national, origin, age, color, disability or other protected status.) _____

List any additional information you would like us to consider. _____

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the Employer the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the Employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The Employer is an Equal Opportunity Employer. The Employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state or federal law.

I understand that just as I am free to resign at any time, the Employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the Employer has the authority to make any assurances to the contrary.

Signature of Applicant _____

Date ____/____/____

