

Employment Application

Employment applications <u>must</u> be emailed to <u>hr@berkleymi.gov</u> for consideration. This form is a fillable PDF. Click into the sections and type to complete. All applicants must complete pages 1-8 of this application packet. Public Safety Officer applicants must additionally complete page 9.

Full Name:					
	First M.	Last			
Address:					
Street Address	City	State	Zip	Code	
Phone Number:		Email Addres	s:		
Position for which you are applying:					
How did you hear about this position?		Minimum	Salary Requir	ements:	
Have you ever been employed by the Cit	y of Berkley	?	Yes	No	
If yes: When		Docition	. I lold		
wnen		Position	і пеій		
Do you have any relatives currently empl	oyed or elec	cted by the City	of Berkley?	Yes	No
If yes, please list them:					
Are you legally authorized to work in the	United State	es?	Yes	No	
Are you 18 years of age or older?	Yes	No			
Type of employment desired (check all th	at apply):	Full -Time	Part-Time	Seasonal	

EEO/ADA Statement:

The City of Berkley does not discriminate in its employment or any other programs or activities on the basis, of sex, race, color, age, height, weight, marital status, national origin, religion, arrest record, physical or mental disability, family status, sexual orientation, gender identity or any other protected category. We provide reasonable accommodation for qualified individuals with a disability if requested. Individuals with special needs who may require assistance with the application process should contact the Human Resources Department at (248) 658-3356 or hr@berkleymi.gov if auxiliary aids or services are needed. Reasonable advanced notice is required.

Employment HistoryPlease begin with your most recent position. If additional pages are necessary, copy this page and attach.

Company: Job Title: Address: Duties Performed:	Salary/Wage:		
Reason for leaving:			
Average Hours Per Week:	May we contact this employer?	Yes	No
Company: Job Title:	Salary/Wage:		
Duties Performed:			
Reason for leaving: Average Hours Per Week:		Yes	No
Company: Job Title: Address:	Salary/Wage:		
Duties Performed: Reason for leaving:			
Average Hours Per Week:		Yes	No

Employment HistoryPlease begin with your most recent position. If additional pages are necessary, copy this page and attach.

Company:	From:	To:	
Job Title:	Salary/Wage:		
Address:			
Duties Performed:			
Reason for leaving:			
Average Hours Per Week:	May we contact this employer?	Yes	No
Company:	From:	To:	
Job Title:	Salary/Wage:		
Address:			
Duties Performed:			
Reason for leaving:			
Average Hours Per Week:	May we contact this employer?	Yes	No
Company:	From:	To:	
Job Title:	Salary/Wage:		
Address:			
Duties Performed:			
Reason for leaving:			
Average Hours Per Week:	May we contact this employer?	Yes	No

Education

School	Name of School	Graduated	Major/ Type of Degree Received
High School			
College			
College			
Other			
Other			

Military Service

Have you had any experience in the U.S. Arme	Yes	No		
Branch:	Rank at [Rank at Discharge:		
Dates of Service:		Reserve Status:		
Did you receive an honorable discharge?	Yes	No		

A dishonorable discharge from the military will not necessarily bar you from employment.

Additional Information

Describe any specialized training, apprenticeships, internships, skills, licenses, endorsements, certificates, and extracurricular activities that pertain to the position for which you are applying (include CDL licenses and endorsements)

Questionnaire

Instructions: Answer all questions in this section. Questions in this section may be job related or required by state or federal laws. Your answers will not be considered unless the information is related to the job for which you are applying. However, your answers will be compared to information obtained in any background investigation, and any discrepancies may disqualify you from consideration.

1.	Have you ever been convicted of a crime(s) other than a minor traffic violation? Yes No a. If yes, please explain, include dates and location:
2.	Do you have any felony charges pending against you? Yes No a. If yes, please explain, include dates and location:
3.	Have you ever been fired or asked to resign (not including layoffs or downsizing)? Yes No a. If yes, please explain:
4.	Has your driver's license ever been suspended or revoked? Yes No
5.	Are you able to perform the essential functions of the job for which you are applying? (We will provide reasonable accommodation to qualified individuals with a disability upon request as required by law.) Yes No

Acknowledgements

I certify that the information in this application is true, complete and correct to the best of my knowledge and understand that falsification, misleading, misrepresentation or omission of any information submitted in connection with my application or interview, whether in this document or not, may result in rejection of my application or, if hired, in dismissal.

I understand that after a conditional offer of employment, I may be required to take a complete physical exam and/or a drug test at the expense of the City.

I hereby authorize an investigation of my past employment, activities and statements contained in this application and release from all liability and responsibility all persons, companies, or corporations supplying such information. I understand that such information may include a record of disciplinary action assessed by previous employers, and hereby release such parties from any obligation to provide me with written notification of such disclosure

I authorize the City of Berkley to release any information (even if more than four years old) relating in any way to my employment including disciplinary reports, letters of reprimand or other notices of disciplinary action when such information is requested by any prospective or subsequent employers without any obligation (by them or you) to give me any notice of such disclosure.

Signature	Date

Criminal History & Driving Record Background Check Consent Form

Full Legal Name:
Any other names used (I.e. Maiden name):
Date of Birth: Current Address:
Driver's License Number: Expiration Date:
Consent and Disclosure
The City of Berkley is committed to providing a safe and secure work environment. As part of our hiring or employment process, we conduct criminal background checks. This process is in accordance with applicable federal, state, and local laws.
By signing this form, you are authorizing the City of Berkley or its authorized agent(s) to obtain and review your criminal history records and driving record as part of your application or continued employment.
This background check may include information regarding past criminal convictions, pending charges, or other law enforcement records as permitted by law.
Authorization and Acknowledgment
I, the undersigned, hereby voluntarily authorize the City of Berkley and/or its agents to conduct a criminal & driving record background check. I understand that:
 This information will be used solely for employment-related decisions. I acknowledge that I have been informed of my rights under the Fair Credit Reporting Act (FCRA) and Michigan state law, including the right to dispute any inaccuracies in the background check report: https://files.consumerfinance.gov/f/documents/bcfp_consumerrights-summary_2018-09.pdf. Providing false or misleading information may result in disqualification from employment or termination.
Signature:
Printed Name:

City of Berkley Equal Employment Opportunity Information Form

The City of Southfield is an EQUAL OPPORTUNITY EMPLOYER. To help us comply with government record keeping requirements we would appreciate your completing the following form. Any information given will not be used to decide if you will be hired. This information will be kept confidential, and only be used in accordance with applicable state and federal laws and regulations. You ARE NOT required to provide this information.

Check the	space that applie	es to you:			
Sex		Race:			Are you a Vietnam Era Veteran?
N	Male		White (0)		Yes
F	emale		Black (1)		No
			Asian/Pacific Islander	(2)	
			American Indian/Alas	skan National (3)	
			Hispanic (4)		
			Multiracial (5): Parent	ts of different races	
		Explain:			
			ection of the form	opriate source be	elow:
,	Job Announce	-			Just walked into Human Resources
	 Job Hotline				Office Group or organization - Which one?
	Internet - Site?	?			_
	Mewspaper ad -	· Which news	paper?		Facebook, Twitter, LinkedIn, other
				Socia	Media - Which one?
	City Employee)			
	Cable Ad				MIWorks Career
	Michigan Emp	loyment Se	curity		Center Other -
	Agency Recei	ved a mailin	g		Explain:
					D. A.
	ied for:				Date:
lame	Last		First		Middle
\ddraga					
Address Stre	et				
0.1					
City		State		Zip Code	County
Social Securi	ty Number:			<u> </u>	
Home Phone	Number: ()		v	√ork Phone Number	:()

7 8

Highest Grade Completed (please circle):



Public Safety Applicants

Are you currently employed or have you ever been employed as a Certified Police Officer, Firefighter, or Public Safety Officer?

	Currently Employed	Previ	ously Employed	No		
If you are curre	ently employed or have	been previous	sly employed, did you	ı leave in ເ	good standing?	
		Yes	No			
If no, please ex	xplain, include details, c	lates and loca	tion:			_
MCOLES Num	nber:					_
Have you pass	sed the MCOLES Readi	ng & Writing 1	Fest? Yes, date o	ompleted:		No
Have you pass	sed the MCOLES Physic	cal Fitness Te	st? Yes, date c	ompleted:		No
	ŕ		est expires after one	year.		S
Training & Certifications:	School Attended:	Status:	Certifications Re	ceived:	Certification Status:	
Police Academy						
Fire Academy						
Medical						
Other						
Additional Inform	Are you a citizen of the	e United States	s? Yes	No		