

***** All Sections of the Application must be completed*****

APPLICATION FOR EMPLOYMENT

**BEXLEY RECREATION DEPARTMENT
165 N. PARKVIEW AVENUE, BEXLEY, OHIO 43209
OFFICE: 614.559.4300 FAX: 614.559.4301**

PERSONAL INFORMATION

POSITION(S) APPLIED FOR: _____ **AVAILABLE TO BEGIN:** _____
(STARTING DATE)

EMAIL: _____ **TELEPHONE:** _____

NAME: _____
(FIRST) (MIDDLE) (LAST)

ADDRESS: _____
(NUMBER/STREET) (CITY & STATE) (ZIP CODE)

DO YOU HAVE A VALID OHIO DRIVER'S LICENSE? _____

HAVE YOU BEEN CONVICTED OF A CRIME IN THE PAST TEN (10) YEARS, _____, IF YES, DESCRIBE IN FULL

PAST WORK EXPERIENCE, SPECIAL SKILLS/TALENTS, OR VOLUNTEER EXPERIENCE. _____

EDUCATION

HIGH SCHOOL: _____

LAST YEAR COMPLETED: 1 2 3 4 Year completed _____

DID YOU GRADUATE? YES: ____ **NO:** ____

COLLEGE: _____

LAST YEAR COMPLETED: 1 2 3 4 Year completed _____

DID YOU GRADUATE? YES: ____ **NO:** ____

(ADDRESS)

(CITY/STATE/ZIP CODE)

(PHONE)

OTHER: _____

LIST ANY PAST ACHIEVEMENTS/AWARDS OR HONORS. ETC _____

*****OVER*****

PERSONAL REFERENCES

(DO NOT INCLUDE RELATIVES OR PAST EMPLOYERS)

NAME

ADDRESS

CITY/STATE/ZIP

PHONE

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY

(List below all present and past employment, beginning with your most recent.)

EMPLOYER

ADDRESS

PHONE

WORK PERFORMED

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

May we contact the employers listed above? _____ if not, indicate by numbers which one(s) you do not wish us to contact. _____

The facts set forth in this application for employment are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I hereby give permission to the City of Bexley, Ohio to check any and all references listed on my application for employment.

Signature

Date