Town of Ossian

Application for Employment

The Town of Ossian is an equal opportunity employer. Applicants are considered for employment without regard to race, color, religion, sex, age, disability, national origin, genetic information, or any other basis prohibited by law, unless such basis constitutes a *bona fide* occupational qualification. **The Town of Ossian** will comply with its legal obligation to provide reasonable accommodation to qualified individuals with disabilities.

Date of Application	
Full Name	
Full Address	
Home Phone: ()	Cell Phone: ()
Email address: If you have resided at your p	present address less than three years, please list your prior address:
Full Address	
Position(s) Desired	Salary Expected \$
Are you available to work	☐ Full Time ☐ Part-Time ☐ Temporary ☐ On-Call ☐ Overtime ☐ Any Shift
On what date would you be	available for work?
Are you on a layoff and subjec	t to recall at another employer? Yes No
Have you filed an applicati	on here before? \square Yes \square No If Yes, give date(s)
Have you ever been employed	here before? □ Yes □ No If Yes, give date(s)
Do you have any relatives or	friends that are employed here? \square Yes \square No
If yes, please list them by na	me and relationship
Why did you apply for a positi	on at the Town of Ossian?
Why do you think you woul	d make a valuable employee of the Town of Ossian:
Are you legally authorized	to work in the United States? Yes No
Are you 18 years or olde	r? □ Yes □ No
infraction? A conviction or ple of a conviction will be asse responsibilities and duties. <u>Ho</u> <u>employment or will result in te</u>	or pled guilty to a felony or misdemeanor other than a minor traffic-related a will not necessarily disqualify you from consideration for employment. The effect essed with respect to time, circumstances, seriousness of the offense, and job wever, your failure to list a conviction will disqualify you from consideration for remination of employment if subsequently discovered. Yes No enviction or plea, the date, and explain

Education

		Number of	Gradu	ıate?	
Type of School	Name of School Town and State	Years Completed	Yes	No	Course Pursued/ Degrees Granted
High School		Completed			
College or					
University					
Business, Trade,					-
Technical, or Correspondence					
School or College					
	<u> </u>				
List any special	job-related skills, software, and qualifications acquired from ed	ducation on	nlovr	nant	volunteer work
or military serv		iucation, cn	трюуг	iiciit,	volunteer work
or minitary serv					
•	lls on office machines, tools, machinery or other equipment that	•			l can operate
that will be help	oful in performing the responsibilities of the position(s) for whi	ch you are	applyi	ng	
	Personal References				
List the name of	address and telephone number of three references who are not re	alated to vo	ı and e	ora no	ot pravious
employers.	radiess and telephone number of three references who are not re	raicu io yoi	a and a	are no	t previous
employers.					
1					
IName	Full Address	Te	lephone	No.	
			•		
า					
Name	Full Address	Te	lephone	No.	
3					
Name	Full Address	Та	lephone	No	
Tunic	Tuli Addiess	10	icpiione	110.	
	PLEASE ANSWER THE FOLLOWING QUESTION	AFTER R	EAD	ING	
	THE JOB DESCRIPTION GIVEN TO YOU WITH YO				ĺ
	of performing in a reasonable manner, with or without a reason	nable accom	ımoda	tion, t	the activities
involved in the j	ob or occupation for which you have applied?				
	☐ Yes ☐ No				

Employment Record

Starting with your present or most recent job, list all your employment experience for at least the last 15 years. You may include job-related military service assignments and volunteer activities that reflect your qualifications for employment.

Employer Name:		Telephone	: :
Address:			
Job Title:		Immediate Supervisor:	
From:	То:	Starting Salary:	Final Salary:
Describe type of work performed:			
Employer Name:		Telephone);
Address:			
Job Title:		Immediate Supervisor:	
From:	To:	Starting Salary:	Final Salary:
Describe type of work performed:			
Employer Name:		Telephone	<u>.</u> :
Address:			
Job Title:		Immediate Supervisor:	
From:	То:	Starting Salary:	Final Salary:
Describe type of work performed:			Salary.
Employer Name:		Telephone	 ::
Address:		•	
Job Title:		Immediate Supervisor:	
From:	То:	Starting Salary:	Final Salary:
Describe type of work performed:			
If you 1	need additional space, ple	ease continue on a separate sheet of	of paper
·	•	•	• •
		Yes No If no, indicate	
NOT wish us to contact a	na state the reason why	you prefer that we do not cont	act the employer(s)
		rather than be discharged, or asl he employer, and the reason	

Applicant's Statement

The Town of Ossian requires a minimum of a high school diploma or a GED for employment as is stated in all job descriptions. A copy of your high school diploma, transcripts, documentation of your GED or college enrollment will be required if you should be hired for any position with the Town of Ossian. We will also do a limited criminal history check for all applicants considered for a position with the Town of Ossian.

If you have a prepared resume or have any additional education, you may also enclose those items.

Please indicate that you have read and understand each applicant statement by placing your initials beside each paragraph.

<u>Initials</u>	
	I certify that this application was completed by me and that all entries and information in it are TRUE and COMPLETE to the best of my knowledge. I understand that false, misleading or omitted information in my application may result in the rejection of my application, the revocation of an offer of employment, or discharge.
	I authorize investigation of all statements contained in this application as may be necessary in arriving at an employment decision. I understand that an investigation may be made and information may be obtained through interviews with personal references and past employers, through a credit check, a criminal history check and/or a driver's record check. This inquiry may include information as to, among other things, my character, general reputation and personal characteristics, as well as information about my work performance and workplace conduct. I consent to this investigation and to the consideration of any statements of references, former employers or others that are given in response to the inquiry. If the Town of Ossian decides to obtain a consumer credit report, I understand that the Town of Ossian will provide, at my request, the name and address of the reporting agency so I may obtain from such reporting agency the nature and substance of information contained in such report.
	I hereby release all parties, including but not limited to the Town of Ossian personal references and previous employers, from liability for any injury or damage that may result from their furnishing information concerning me or any action the Town of Ossian takes on the basis of such information.
	I understand that, if I am offered a job, as a condition of beginning my employment, I may be required to undergo a physical examination and drug screen, and I hereby authorize any doctor, hospital, clinic, laboratory and/or other medical facility to furnish any medical information with reference to me as may be necessary in conjunction with that examination and related considerations.
	I understand that, according to federal law, all individuals who are hired must, as a condition of employment, produce certain documentation to verify their identity and United States citizen status or, if aliens, their legal authorization to work in the United States. As a consequence, I understand that any offer of employment to me is contingent upon my ability to produce the required documentation within the time period required by law.
	I understand that this application is not, and is not intended to be, a contract of employment and that any resulting employment is for no fixed period of time and is terminable at any time and for any reason by me or by the Town of Ossian. I further understand that statements which may be contained in policies, practices, handbooks or other material do not create any guarantee of employment and that the Town of Ossian has the right to modify, amend or terminate policies, practices, benefits plans or other programs within the limits and requirements imposed by law. I understand that no representative of the Town of Ossian, other than an officer, has the authority to enter into any agreement for any specific period of time or to make any agreement contrary to the foregoing and that any such agreement must be in writing to be binding.
	I understand that, upon employment, I will sign an agreement relating to confidential information, if required. I certify that I am not bound by any employment contract or non-competition agreement that would be breached by any employment that might be offered to me by the Town of Ossian, nor am I in possession of nor will I at any time reveal to the Town of Ossian, under any circumstances, any proprietary or confidential information that is the subject of any contract, non-disclosure agreement or prior work relationship involving any other person or entity.
Signature of	Applicant: Date:

Nepotism Policy

Verification of Applicant for Employment for compliance v	with Municipal Nepotism Policy
I, supervision for the position I am seeking with the "Town who will be in my direct line of supervision in the position parent or step-parent, child or step-child, brother, sister, daughter-in-law or son-in-law (including half-bloods and a supervision of the position of the posi	of Ossian" and I am not a relative of any employee on of . I understand that Relative means my spouse step-brother, step-sister, niece, nephew, aunt, uncle
I hereby verify under the penalty of perjury that the foregot X:	oing statements are true. Date:
(Applicant Signature)	

Town of Ossian

Clerk/Treasurer & Town Manager Office 507 N. Jefferson St. Ossian, IN 46777

Phone 260-622-4251	email: townmanager@ossianin.com
Fax 260-622-6250	email: clerk@ossianin.com
Date:	
REQUEST FOR RELEASE	OF LIMITED CRIMINAL HISTORY INFORMATION
Department, Wells County, Indiana to release to	e my consent to the Ossian Police Department, and Wells County Sheriff's o the office of the Clerk-Treasurer & Town Manager any and all criminal history appears in the records of the Ossian Police Department and/or the Wells County ent.
	all rights to claims which I may have against the Town of Ossian, Wells County, herriff's Department or any of the officers or employees of the Town of Ossian f the release of this criminal history information.
PRINTED NAME:	
MAIDEN NAME:	
ADDRESS:	
DATE OF BIRTH:	SS Number:
SIGNATURE:	Date:
****** FOR POLICE DEPAR	TMENT/SHERIFF'S DEPARTMENT USE ONLY *******
() NO LOCAL ADULT CRIMINA	AL CONVICTION DATA FOUND
() SEE ATTACHED CRIMINAL	HISTORY
Signature:	
OSSIAN POLICE/WELLS COUNTY S	SHERIFF'S DEPARTARTMENT
DATE:	
***********	******************

NOTE: ANY CRIMINAL HISTORY INFORMATION FURNISHED IS LIMITED TO FELONY AND MISDEMEANOR ARRESTS BY OFFICERS OF THE OSSIAN POLICE DEPARTMENT AND WELLS COUNTY SHERIFF'S DEPARTMENT BASED UPON THE INFORMATION PROVIDED ABOVE