

Village of Haskins, Ohio

405 N. Findlay Rd., PO Box 182

Haskins, Ohio 43525

Employment Application

419-823-1911

PERSONAL INFORMATION									
LAST NAME			FIRST		MIDDLE			HOME PHONE	
ADDRESS			CITY		STATE		ZIP CODE		CELL PHONE
AGE	HEIGHT	WEIGHT	HAIR	EYES	DATE OF BIRTH		PLACE OF BIRTH		
SOCIAL SECURITY NUMBER			DRIVER'S LICENSE NUMBER			STATE			
LIST ALL ADDRESSES YOU HAVE LIVED AT FOR THE PAST TEN (10) YEARS. INCLUDE YOUR ADDRESSES IN THE MILITARY SERVICE, IF APPLICABLE.									
FROM	TO	ADDRESS & ZIP CODE					COUNTY	STATE	
REFERENCES									
LIST THREE (3) CHARACTER REFERENCES (NOT RELATIVES) WHO HAVE KNOWN YOU WELL DURING THE PAST THREE (3) YEAR.									
NAME					PHONE NUMBER		YEARS ACQUAINTED		
ADDRESS					CITY		STATE	ZIP	
NAME					PHONE NUMBER		YEARS ACQUAINTED		
ADDRESS					CITY		STATE	ZIP	
NAME					PHONE NUMBER		YEARS ACQUAINTED		
ADDRESS					CITY		STATE	ZIP	

CERTIFICATION OF APPLICATION & RELEASE OF INFORMATION

I, (print full name) _____, hereby certify that all statement made on or in connection with this application are true and complete to the best of my knowledge and belief. I understand and agree that any mis-statement or omissions of material facts with cause forfeiture on my part of all rights to employment with the Village of Haskins, Ohio. I further authorize Full Release of Information (for 1 year) to the Village of Haskins.

Signature

Date