



TOWNSHIP of BURT

ALGER COUNTY

P.O. BOX 430

GRAND MARAIS, MI 49839-0430

906-494-2381

Fax: 906-494-2627

www.burrtownship.com

Job Application

Instructions: Print clearly in black or blue ink. Answer all questions. Sign and date the form.

PERSONAL INFORMATION	
Name	First Middle Last
Address	
City, State, Zip	
Phone # & Email	
Drivers License (Required)	State Number (Attach copy) Expiration Date
Citizenship	If other than U. S. – do you have a work visa <input type="checkbox"/> Yes <input type="checkbox"/> No
Are you over age 18?	<input type="checkbox"/> Yes <input type="checkbox"/> No Date of Birth if under 18: ____/____/____
If not, do you have an employment/age certificate?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of or pleaded no contest to a felony?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, please explain:	
POSITION/AVAILABILITY	
Position Applied For	<input type="checkbox"/> Full time <input type="checkbox"/> Part time <input type="checkbox"/> Seasonal
What date are you available to start work?	
EDUCATION	
Name and Address Of School - Degree/Diploma - Graduation Date	
Skills and Qualifications: Licenses, Skills, Training, Awards	
OTHER INFORMATION	
Have you ever been employed by Burt Township?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, When?	What Position?
Do you have any relatives, including in-laws, currently employed by Burt Township?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, Who?	
MILITARY SERVICE and STATUS	
Branch of Service:	
Military Occupation:	
Date of Entry:	
Date of Separation:	Rank:

EMPLOYMENT HISTORY

EMPLOYMENT HISTORY	
Present Or Last Position	
Employer:	
Address	
Supervisor	
Phone	
Email	
Position Title	
Responsibilities	
Salary	
Dates of Employment	From: _____ To: _____
Reason for Leaving	
Previous Position:	
Employer:	
Address	
Supervisor	
Phone	
Email	
Position Title	
Responsibilities	
Salary	
Dates of Employment	From: _____ To: _____
Reason for Leaving	
May We Contact Your Present Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
References: Name/Title Address Phone	

Background Investigations

Driver Record: The Township Clerk shall take a photo copy of the employee’s valid **driver’s license** and submit it to the Michigan Department of State for Driver License review through the Subscription Service program. A report of the findings will be made available to the Township Board.

Criminal Investigation: The Township Clerk shall submit a prospective employee’s information for investigation through the Michigan State Police ICHAT on-line program. A report of the findings will be made available to the Township Board.

I hereby certify that information contained in this application is true and complete and that I have not knowingly withheld any facts, circumstances or other information which would, if disclosed, affect my application. I understand that false information may be grounds for not hiring me or for immediate termination of employment at any point in the future if I am hired. I authorize the verification of any or all information listed above.

Signature:

Date: