

2018 Application for Township Appointment
Tuscola Township
 8561 Van Cleve • P. O. Box 1702 • Vassar, MI 48768

Name: _____ Email: _____

Address: _____

Telephone Number(s): _____

Date of Application: _____ Date available to begin work: _____

Please indicate desired and/or acceptable appointments:

- | | | |
|---|--|---|
| <input type="checkbox"/> Planning Commission | <input type="checkbox"/> Zoning Administrator | <input type="checkbox"/> Blight Enforcement |
| <input type="checkbox"/> Parks and Recreation | <input type="checkbox"/> Election Inspector | <input type="checkbox"/> Custodian |
| <input type="checkbox"/> Board of Review | <input type="checkbox"/> Zoning Board of Appeals | <input type="checkbox"/> Other |

Why are you interested in this position? _____

Please list community involvement: _____

Please list any relevant experience/skills: _____

Educational Background: _____

Please give the name of three references, not related to you, whom you have known for over a year:

Name	Address	Phone	Years Known

Have you ever worked for another governmental entity? Yes ____ No ____

Which ones/In what capacity? _____

If related to anyone in our employ, state name and relationship to you: _____

Are you presently employed? _____

Please list two most recent full-time and/or part-time employment:

Company Name	Phone
Address	Employment Dates From To
Supervisor	Reason for leaving
Job Title/Description	

Company Name	Phone
Address	Employment Dates From To
Supervisor	Reason for leaving
Job Title/Description	

Have you ever been discharged or requested to resign any job? Yes ____ No ____

If YES, please explain circumstances: _____

Have you ever been convicted of a felony? Yes ____ No ____

If yes, please explain: _____

Signature

By signing this application, I am agreeing to support and abide by the Constitution and Laws of the United States and of the State of Michigan, and the Ordinances of Tuscola Township.

If the township decides to engage an investigative consumer report agency to report on my personal history, I authorize them to do so. If a report is obtained the township must provide, at my request, the name of the agency so I may obtain from them the nature and substance of the information contained in the report.

Applicant's Signature _____ Date _____

**Applications will be retained for one year.*

**Tuscola Township is an equal opportunity employer.*

**Tuscola Township reserves the right to accept or reject any application.*