



Bedford Heights Website



CITY OF BEDFORD HEIGHTS
YOUTH EMPLOYMENT APPLICATION (AGES 14 – 17)
FLETCHER D. BERGER, MAYOR

Pre-Employment Questionnaire / An Equal Opportunity Employer

PERSONAL INFORMATION

Last Name First Name Middle
Address City State Zip
Home Phone: Cell Phone: Email:
Social Security Number (provide upon being hired):
Desired Position: Date You Can Start: Desired Salary:
What is your current age? Are you applying for a seasonal position?
Do you have a Photo I.D.? Do you have a driver's license?
Ever worked with this city before? If Yes, what year; what department

EDUCATION

What Grade/Year are you in?
What was your GPA on your last reporting period?

REFERENCES Below, give the names of two persons you are not related to, whom you have known at least one year.

Table with 5 columns: Name, Address/City, Phone, Years Acquainted, Type of Relationship

AUTHORIZATION

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the city from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the city has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by the mayor."

SIGNATURE DATE
STATE OF OHIO
CUYAHOGA COUNTY, SS:
Sworn to and subscribed in my presence this ___ day of ___

Signature of Notary Public

FORMER EMPLOYERS OR PLACES YOU VOLUNTEERED

IF YOU HAVE WORKED PREVIOUSLY (OR VOLUNTEERED), LIST THE LAST THREE EMPLOYERS (*MOST RECENT FIRST*)

Employer Name	Address	Start Date	End Date	Supervisor	Supv Phone	Job Title

**DO NOT WRITE BELOW
FOR INTERVIEWER'S USE ONLY**

INTERVIEWED BY:	DATE
COMMENTS	
NEED MODIFICATION <input type="checkbox"/> NO <input type="checkbox"/> YES (SPECIFY) Driver's License/Photo I. D. checked <input type="checkbox"/>	

BACKGROUND CHECK

REPORTED BY:	DATE
<input type="checkbox"/> RECOMMENDED	<input type="checkbox"/> NOT RECOMMENDED
POLYGRAPH <input type="checkbox"/> NOT REQUIRED <input type="checkbox"/> PASSED ON _____ <input type="checkbox"/> DID NOT PASS	
SIGNIFICANT CONCERNS	

HIRED (DATE) FOR DEPT.		FOR POSITION:
SALARY WAGES		WILL REPORT:
APPROVED 1	MAYOR	DATE:
APPROVED 2	DEPARTMENT HEAD	DATE:
APPROVED 3	FINANCE DEPARTMENT	DATE:

**Employment Applications after hiring are kept in personnel files in the payroll office.
All other employment applications are retained for review for a period of 12 months from the date of submission**