



Date: _____

C.C.E. CENTRAL DISPATCH AUTHORITY

Application for Employment

1694 US Highway 131 Petoskey, MI 49770 - Telephone (231) 347-3911 - (800) 918-9111 - FAX (231) 348-1087

C.C.E. Central Dispatch Authority is an equal opportunity employer and does not discriminate against any employee or applicant for employment because of race, color, religion, national origin, age, disability, or any other reason prohibited under Federal, State, or local laws. Additionally, C.C.E. Central Dispatch Authority is a drug free workplace.

Name: _____
Last First Middle

Other Names Used: _____

Address: _____
Street City State Zip

Home Telephone # _____ Best Time to Call _____

Email Address _____

May we contact you at work? Yes No N/A

If yes: Work Telephone # _____ Best Time to Call _____

Have you ever been employed by C.C.E. Central Dispatch Authority? Yes No

If yes, give dates: _____ to _____ as a _____

Are you legally eligible for employment in the United States? Yes No

(Proof of U.S. Citizenship or immigration status will be required upon employment)

Type of Employment Desired: Full Time Part Time Temporary Seasonal

Will you work overtime if required? Yes No Date available for work: _____

Do you have a valid driver's license? Yes No

License # _____ Class _____ State _____ Expiration Date: _____

Have you ever had your driver's license suspended or revoked? Yes No

If yes, please explain. Include dates, places, and nature of offenses.

Have you ever been convicted, or entered a guilty plea or no-contest for any felony? Yes No

Note: a "yes" answer will not automatically disqualify you from employment with C.C.E. Central Dispatch. If yes, please explain. Include dates, places, and nature of offenses.

Are you presently under indictment for any felony offense? Yes No

If yes, please explain. Include dates, places, and nature of offenses. Do not include information for any charges that have been dismissed or are no longer pending.

Have you ever been dismissed from any job? Yes No

If yes, please explain. _____

Educational Background:

Check highest grade completed: High school 9 10 11 12 GED College: 1 2 3 4
 Graduate Work: Yes No

College/University/Trade School	City/State	Certificate/Degree	Major

If you are fluent in any languages other than English, please list: _____

Employment History

List your complete employment history for the past **ten** years, starting with your most recent employer. List all positions held, including military experience, part-time summer and/or volunteer work periods of employment; do not omit any employers. Explain any gaps in employment in comment section. If you are submitting a resume, you are still required to summarize your job responsibilities in the space provided.

Current Employer	Dates Employed	Contact for employment verification:	
Employer Name: _____	From: _____ To: _____	Name: _____ Telephone: _____	
Telephone: _____ Address: _____ Job Title: _____	Starting Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	Final Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	May we contact current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Summarize your job responsibilities		Reason for Leaving:	
_____		_____	
_____		_____	
_____		_____	

Previous Employer	Dates Employed	Contact for employment verification:	
Employer Name: _____	From: _____ To: _____	Name: _____ Telephone: _____	
Telephone: _____ Address: _____ Job Title: _____	Starting Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	Final Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Summarize your job responsibilities		Reason for Leaving:	
_____		_____	
_____		_____	
_____		_____	

Previous Employer	Dates Employed	Contact for employment verification:	
Employer Name: _____	From: _____ To: _____	Name: _____ Telephone: _____	
Telephone: _____ Address: _____ Job Title: _____	Starting Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	Final Salary <input type="checkbox"/> Hourly <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly	May we contact previous employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Summarize your job responsibilities		Reason for Leaving:	
_____		_____	
_____		_____	
_____		_____	

Professional/Work References:

List name and telephone number of three **professional/work** references who are not related to you. Please include one previous supervisor.

Name, Company, Address	Telephone

Special Skills and Qualifications:

Typing _____ WPM List any PC applications you have used:

Job-Related Certificates	Date Acquired	Status: Current/Void

List special accomplishments, publications, awards and the names of professional groups of which you are or have been a member:

List any relative(s) working for C.C.E. Central Dispatch Authority:

List any additional comments and/or information you would like us to consider:

Where did you hear about us? Check all that apply:

- CCE Website Employee Referral: _____
- APCO/NENA Website Newspaper: _____
- Friend/Relative Other: _____

I certify that all information on this application form is complete and accurate. I understand that any omissions or misstatements of facts are cause for rejecting my application or, if I am hired, termination of employment. I also authorize C.C.E. Central Dispatch Authority to make all necessary and appropriate investigations to verify the appropriate information provided in this application and to secure additional job-related information about me. I understand that this application is not an employment contract. Any applicant requiring accommodation for a disability should advise the Human Resources Department.

<p>_____</p> <p><i>Signature</i></p>	<p>_____</p> <p><i>Date</i></p>
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