



**WOOSTER-ASHLAND REGIONAL COUNCIL OF GOVERNMENTS (WARCOG)**  
**APPLICATION FOR EMPLOYMENT**  
 An Equal Opportunity Employer

This application will not be considered for employment with the WARCOG unless all information requested has been completed. Your resume is not a substitute for this application; however, you may attach it when completed. All applications must be submitted to the WARCOG Human Resources either by mail to 538 N. Market St., Wooster, Ohio 44691, by fax to 330-263-5213, by email to applicant@WARCOG.com.

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex, national origin, age, marital status, or veteran status, citizenship, genetic information, or disability.

<b>Personal Information</b>			
Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home Phone: (____) _____ - _____	Are you a United States Citizen or legally eligible to work in the U. S.? Yes_____ No_____ (if hired, you will be required to provide documentation that you are eligible to work in the U.S.)		
Work Phone: (____) _____ - _____			
Other: (____) _____ - _____			
E-mail address: _____		Are you 18 or over? Yes_____ No_____	
Position Desired		Date Available to Work	
Are you available for full-time work? Yes_____ No_____			
Are you available for part-time work? Yes_____ No_____			
How did you learn of this job opening? _____			
Have you been previously interviewed or employed by the WARCOG? Yes_____ No_____			
If Yes, list date(s) and job title(s): _____			
Do you have any relatives currently working for the WARCOG? Yes_____ No_____			
If Yes, list names and relationship to you: _____			
Are you employed now? Yes_____ No_____ If so, may we contact your present employer? Yes_____ No_____			
Do you have a valid State of Ohio Driver's License? Yes_____ No_____			
Do you have a valid Driver's License from another state? Yes_____ No_____			
License number and state: _____			
Has your driver's license ever been suspended, revoked, denied, or cancelled? Yes_____ No_____ If yes, please explain: _____			

A record of criminal conviction will not necessarily be a bar to employment, since the WARCOG will consider factors such as age, time of the offense, the nature and seriousness of the violation, and the evidence of rehabilitation in making any employment decision.

Have you ever been convicted of a crime, other than minor traffic violations? Yes \_\_\_\_\_ No \_\_\_\_\_

If your answer is yes, please explain: \_\_\_\_\_

### Education

Name and Location	# Years Completed	Major Area of Study	Degree/Diploma
High School			
College			
Graduate School			
Technical or Certificate Programs			

### Employment History

Please provide the following information for your previous three employers, beginning with the most recent: (Please attach an additional page if necessary, do not use "see attached resume".)

<b>Employer #1:</b>	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Annual Salary Start: _____ Finish: _____		
Reason for Leaving:		
Will you receive a satisfactory reference from this employer? Yes _____ No _____	If "No", please explain:	

<b>Employer #2:</b>	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Annual Salary Start: _____ Finish: _____		
Reason for Leaving:		
Will you receive a satisfactory reference from this employer? Yes _____ No _____	If "No", please explain:	

<b>Employer #3:</b>	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Annual Salary Start: Finish:		
Reason for Leaving:		
Will you receive a satisfactory reference from this employer? Yes _____ No _____	If "No", please explain:	

<b>Employer #4:</b>	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Annual Salary Start: Finish:		
Reason for Leaving:		
Will you receive a satisfactory reference from this employer? Yes _____ No _____	If "No", please explain:	

<b>Employer #5:</b>	Dates Employed: From _____ To _____	Job Title:
Address:		
Telephone:	Job Duties:	
Annual Salary Start: Finish:		
Reason for Leaving:		
Will you receive a satisfactory reference from this employer? Yes _____ No _____	If "No", please explain:	

Have you ever been discharged or asked to resign by an employer? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain

\_\_\_\_\_

\_\_\_\_\_

Describe your qualifications for the type of employment you are seeking: (Please include skills, special training, etc.)

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Please list any special awards, honors, scholarships, or offices held.

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<b>References</b> Please list names of supervisors, managers, or others who can comment directly on your abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known

**PLEASE READ THE FOLLOWING PARAGRAPHS CAREFULLY**

By signing below, I certify that I have read, understand and agree to each of the following statements:

All of the information I have supplied on this application is true, accurate and complete, to the best of my knowledge, and I have not knowingly withheld any information that, if known to the WARCOG, would affect my application unfavorably.

If I am hired by the WARCOG, and if the WARCOG discovers at any time during my employment that any of the statements or answers on this application are false, misleading, or incomplete, I may be dismissed immediately from my job.

This employment application will be considered only if it is submitted in response to a current job opening. If I want to be considered for a future job opening with the WARCOG, I must fill out another application in response to that opening or contact the Human Resources to request consideration of this application.

If offered a position, I agree to submit to post-offer pre-employment testing for drugs or alcohol prior to beginning work with the WARCOG, and understand that a positive test will form the basis for rescission of any job offer. I understand that if I am employed by the WARCOG, I may be required, when job related and consistent with the WARCOG's business needs, to undergo a medical examination or testing for alcohol. I further understand that I may be required to submit to a test for the use of illegal drugs.

In consideration of my employment with the WARCOG, I agree to adhere to the WARCOG's organizational goals and abide by all of the WARCOG's rules and regulations.

I understand that nothing in this employment application creates a contract of employment between me and the WARCOG. If I am hired by the WARCOG my employment and compensation are "at will," which means that my employment can be terminated, either by the WARCOG or me, with or without cause, and with or without notice. I understand that no manager or supervisor has the authority to make any employment agreement with me, either orally or in writing, which is not an at-will agreement. Only the WARCOG Board of Directors or designee has the authority to enter into an employment agreement with me for any specified period of time.

I agree to release to the WARCOG or its designated agents all medical information, including but not limited to files, reports, x-rays, evaluations, and opinions held by medical personnel, to the extent such information is job-related and consistent with the WARCOG's business needs. I acknowledge that this is a general release and that if hired, it remains in effect for the duration of my employment.

In the event of my personal indebtedness to the WARCOG, I authorize the WARCOG to withhold from my wages, including any last paycheck, such amounts as permitted by law to satisfy my obligation to the WARCOG.

**READ CAREFULLY BEFORE SIGNING:**

I understand and agree that any causes of action or claims that I may have or bring against the WARCOG, or that the WARCOG may have or bring against me, shall be commenced within the applicable statute of limitations period, within six (6) months of my knowledge of such claim or cause of action, or within six (6) months after my separation from employment, whichever is earlier.

I give the WARCOG my permission to conduct any investigation regarding the information contained in my employment application, which the WARCOG thinks is necessary to determine my qualifications for assuming a job with the WARCOG. I give the WARCOG or designee my permission to contact any former employer, school, college or university, utility company, credit or finance bureau or office, any personal or professional reference, or any other appropriate source or individual for the purpose of gathering any information, personal or otherwise, that such sources may have about my character, general reputation, credit, education, or employment record, and I give my consent to any such source to release to the WARCOG or designee whatever information they have about me. I also unconditionally release all named and unnamed sources from any and all liability that might result from furnishing any information about me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**WARCOG AFFIRMATIVE ACTION: VOLUNTARY SELF IDENTIFICATION FORM**

Wooster-Ashland Regional Council of Governments is an Equal Opportunity Employer. As required by law, we must record certain information to be made a part of our Affirmative Action Program.

Applicants for employment are also invited to participate in the Affirmative Action Program by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our Affirmative Action Program. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

**Section 1: General Applicant Information**

Name \_\_\_\_\_

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Position applied for \_\_\_\_\_

**Section 2: Please check (4) all that apply (See next page for definitions)**

**Race or Ethnic Identity**

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- Native Hawaiian or Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Two or More Races (not Hispanic or Latino)
- I do not wish to Self-Identify**

**Gender**

- Male
- Female

**\*\*Veteran Status**

- Vietnam Era Veteran
- Disabled Veteran
- Special Disabled Veteran
- Other Protected Veteran
- Recently Separated Veteran
- Armed Forces Service Medal Veterans
- \*\*Other**
- Individual with Disabilities

**Signature:** \_\_\_\_\_

**How did you hear of our opening?**

- Current Employee
- Newspaper Ad
- Recruiter
- Other - Explain: \_\_\_\_\_

**For Human Resources Use Only:**

**Requisition #**

**Job Group**

## EEOC RACE/ETHNIC IDENTIFICATION CATEGORIES

**Hispanic or Latino** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.

**White (Not Hispanic or Latino)** A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

**Black or African American (Not Hispanic or Latino)** A person having origins in any of the black racial groups of Africa.

**Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

**Asian (Not Hispanic or Latino)** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

**American Indian or Alaska Native (Not Hispanic or Latino)** A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.

**Two or More Races (Not Hispanic or Latino)** All persons who identify with more than one of the above five races.

**Individual with Disabilities** Defined as a person who (1) has a physical or mental impairment which substantially limits one or more of his or her major life activity(s), (2) has a record of such impairment(s), or (3) is regarded as having such impairment(s). For purposes of this definition, an individual with disability(s) is substantially limited if he or she is likely to experience difficulty in securing, retaining, or advancing in employment because of the disability(s).

**Veteran of the Vietnam-Era** Defined as (a) an active duty wartime or campaign badge veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense. (b) an Armed Forces service medal veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985 (61 FR 1209).

**Disabled Veteran** Defined as (1) a veteran of the U.S. military, ground, naval or air service who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Secretary of Veterans Affairs, or (2) a person who was discharged or released from active duty because of a service-connected disability.

**Special Disabled Veteran** Defined as a veteran who is entitled to compensation (or who but for the receipt of military retired pay would be entitled to compensation) under laws administered by the Department of Veterans Affairs for a disability:

1. Rated at 30 percent or more; or
2. Rated at 10 or 20 percent in the case of a veteran who has been determined under 38 U.S.C. 3106 to have a serious employment handicap; or
3. A person who was discharged or released from active duty because of a service-connected disability.

**Veteran of the Vietnam Era** Defined as a person who served on active duty for a period of more than 180 days, and was discharged or released therefrom with other than a dishonorable discharge, if any part of such active duty occurred:

- In the Republic of Vietnam between February 28, 1961, and May 7, 1975; or
- Between August 5, 1964, and May 7, 1975, in all other cases; or
- Was discharged or released from active duty for a service-connected disability if any part of such active duty was performed in the Republic of Vietnam between February 28, 1961, and May 7, 1975; or between August 5, 1964, and May 7, 1975, in all other cases.

**Recently Separated Veteran** Any veteran who served on active duty in the U.S. military, ground, naval or air service during the one year period beginning on the date of such veteran's discharge or release from active duty.

**Pre-JVA Veteran** Defined as an individual who is an employee of or applicant to a contractor with a contract of \$25,000 or more entered into prior to December 1, 2003 and unmodified since to \$100,000 or more, and who is a special disabled veteran, veteran of the Vietnam era, pre-JVA recently separated veteran, or other protected veteran.

**Armed Forces Service Medal Veteran** Defined as any veteran who, while serving on active duty in the U.S. military, ground, naval or air service, participated in a United States military operation for which an Armed Forces service medal was awarded pursuant to Executive Order 12985.

**Active Duty or Wartime Campaign Badge Veteran** Defined as a veteran who served on active duty in the U.S. military, ground, naval or air service during a war or in a campaign or expedition for which a campaign badge has been authorized, under the laws administered by the Department of Defense.