



EMPLOYMENT INFORMATION

The City of Muskegon has contracted with the County of Muskegon to provide human resources services.

1. CONSIDERATION OF YOUR APPLICATION DEPENDS UPON THE FOLLOWING:
 - FULLY COMPLETED EMPLOYMENT APPLICATION SUBMITTED BY THE DEADLINE, IF APPLICABLE!
 - Incomplete applications may be disqualified from further employment consideration.
 2. OUT-OF-STATE APPLICANTS:
 - Your Driving Record: You must obtain your driving record from the state issuing your license. Mail the driving record report to the Civil Service address on the front page of the application. The driving record report must be on file by the application deadline date.
 3. WHETHER OR NOT YOU MEET THE POSITION REQUIREMENTS, AS STATED ON THE JOB ANNOUNCEMENT. If you do not qualify, pass the testing, and/or obtain employment, you may re-apply at the next opportunity.
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FOLLOWING AN APPLICATION DEADLINE, YOU WILL BE MAILED INFORMATION ABOUT THE STATUS OF YOUR APPLICATION.

- Please allow sufficient time to receive the notice of your application status, depending on the recruitment type.
- Whether or not your application is accepted for employment consideration, you will be notified by mail of your status. If your application is accepted, your letter also will inform you of any test date(s) and location(s).

CANDIDATES PROGRESS IN THE RECRUITMENT AS FOLLOWS:

- Those passing the practical/written exam(s), if given, will move on to the oral exam.
- The oral exam is a graded panel interview; it is not a hiring interview but rather part of the recruitment.
- Additional practical (hands-on) tests may be given for select positions. Generally these are pass/fail exams.

SCORES FROM YOUR ORAL EXAM AND WRITTEN TEST ARE AVERAGED TO DETERMINE YOUR FINAL SCORE.

- Your final score is used to determine your placement on the eligibility (hiring) list.
- Candidates' names generally remain on eligibility list for up to one year.

AS OPENINGS OCCUR, CANDIDATES IN THE HIRING LIST'S TOP 3 RANKINGS ARE REFERRED FOR DEPARTMENT INTERVIEWS.

- Candidates are notified by mail of the interview opportunity.
- This is the hiring interview! (Refusal of this interview may result in removal of your name from the hiring list.)
- A candidate is hired from this group to fill a vacancy.

Employment opportunities are posted on the City's web site at <http://www.muskegon-mi.gov/departments/civil-service/> or contact the City's human resources service provider:

Muskegon County Human Resources Department
316 Morris Avenue, Suite 200
Muskegon, MI 49440

Telephone Number (877) 521-JOBS

A COMPLETED APPLICATION IS REQUIRED FROM ALL CANDIDATES; THE CITY DOES NOT SOLICIT OR RECOGNIZE A RESUME ONLY AS AN APPLICATION

APPLICATIONS REMAIN ON FILE FOR ONE YEAR FROM DATE OF RECEIPT

If you require special accommodation(s) in testing due to a legally defined disability, please notify the Human Resources Department in writing at the time of application.



The City of Muskegon contracts with the County of Muskegon for human resources services. Submit application to:

MUSKEGON COUNTY HUMAN RESOURCES DEPARTMENT 316 Morris Avenue, Suite 200 Muskegon, MI 49440 Telephone (877) 521-JOBS Fax (231) 724.6840 As E-mail attachment: jobs@co.muskegon.mi.us

City of Muskegon Application for Position(s) of:

APPLICATIONS ARE KEPT ON FILE FOR ONE YEAR.

The City of Muskegon is an equal opportunity employer and shall consider all qualified applicants without regard to race, color, sex, religion, national origin, age, height, weight, marital status, veteran status, handicap, or any other protected class.

PERSONAL INFORMATION:

Phone Number Email Address

Street Address City State Zip

Date available for work: ___/___/___ Available for [] Full-time [] Part-time [] Temporary [] Seasonal [] Yes [] No

Do you have a valid, unrestricted driver/operator license?

If no, please explain _____

Have you had your driver's license suspended, revoked, or restricted in the past three years? [] Yes [] No

If yes, please explain _____

Driver License Number State of Issue

Do you have a valid commercial driver license (CDL)? [] Yes [] No

If yes, type and endorsement(s) _____

Have you ever worked for the City of Muskegon? [] Yes [] No

If yes, position held: _____

Employment date(s) _____

Do you have friends and/or relatives employed by the City? [] Yes [] No

If yes, please list _____

Do you hold a National Career Readiness Certificate? [] Yes [] No

If yes, please indicate whether it is [] Bronze [] Silver [] Gold

Are you 18 years of age or older? [] Yes [] No

Are you on layoff? [] Yes [] No

If on layoff, are you subject to recall? [] Yes [] No

Are you authorized to lawfully work in the U.S.? [] Yes [] No

(Proof of employment eligibility will be required upon hire.)

MILITARY SERVICE:

Have you had any experience in the Armed Forces of the United States of America or in a State National Guard? [] Yes [] No

If yes: Branch _____ Discharge Rank _____

Service Dates _____

Middle

First Name

Last Name



EDUCATION:

Do you possess a high school diploma or G.E.D.? Yes No

Please give school/trade school/college information below:

School Name & Location	Credits Earned	Graduate	Curriculum
(High School)		Yes/No	
(College or Trade School)		Yes/No	
(College or Trade School)		Yes/No	
(Other)		Yes/No	

EMPLOYMENT:

Have you ever been discharged or forced to resign from any position? Yes No

If yes, please explain: _____

Do you believe you can perform the job duties related to the position(s) for which you applied with or without accommodation? ... Yes No (Note: Job description available upon request.)

If no, please explain: _____

YOU MUST COMPLETE THIS PART EVEN IF SUBMITTING A RESUME:

Please list your employment and/or unemployment history.

Start with your present job status and work backward, chronologically accounting for time periods.

Employer Name & Address:	Dates		Work Performed:
	From	To	
Telephone Number:	Hourly Rate/Salary		
Job Title:	Start	Final	
Supervisor's Name:			
Reason for leaving:			
Employer Name & Address:	Dates		Work Performed:
	From	To	
Telephone Number:	Hourly Rate/Salary		
Job Title:	Start	Final	
Supervisor's Name:			
Reason for leaving:			

Full-time
 Part-time _____ hours per week



Employer Name & Address:	Dates		Work Performed:
	From	To	
Telephone Number:	Hourly Rate/Salary		
Job Title:	Start	Final	
Supervisor's Name:			
Reason for leaving:			
			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time _____ hours per week
Employer Name & Address:	Dates		Work Performed:
	From	To	
Telephone Number:	Hourly Rate/Salary		
Job Title:	Start	Final	
Supervisor's Name:			
Reason for leaving:			
			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time _____ hours per week

TRAINING AND SKILLS: *(Circle the functions with which you are proficient)*

Computer: ACCESS EXCEL WORD WORDPERFECT OUTLOOK POWERPOINT PUBLISHER

Other applications: _____

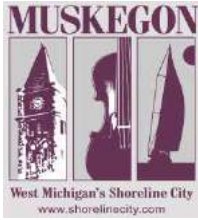
Heavy Equipment: BULLDOZER EXCAVATOR FRONT-END LOADER GRADER LG SNOW PLOW

Other: _____

REFERENCES: *(Please list two personal references who you have known for at least two years; do not include relatives.)*

Name **Address** **Telephone**

AN INCOMPLETE APPLICATION WILL NOT RECEIVE FURTHER EMPLOYMENT CONSIDERATION



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CITY OF MUSKEGON

FAIR CREDIT REPORTING ACT AUTHORIZATION & WAIVER

I authorize and request my former employers, references, educational institutions, and any credit agencies or reporting services that have information about me to give the City of Muskegon or its agents any information and/or opinions about me in their possession and which may lawfully be disclosed. I hereby waive written notice of such release of information and opinions, and I release such former employers, references, educational institutions, and credit agencies or reporting services from any liability or claim relating to such release of information and opinions. I also authorize and request federal, state, and local governmental agencies to release to the City of Muskegon or its agents any information requested concerning any criminal convictions on my record. A photocopy of this signed authorization and waiver will be valid as an original.

I agree that the City of Muskegon or its agents may obtain a consumer credit report about me in connection with my application for employment.

If my application is denied on the basis of information contained in a consumer credit report, or if an adverse action is taken against me regarding my employment based on information contained in a consumer credit report, I may request copy of the report and description of my rights under the Fair Credit Reporting Act.

Date

Applicant's Signature

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AGREEMENT AND UNDERSTANDING

(Read carefully and sign below if you agree to these terms of employment.)

I certify that the information on this application is true, complete, and correct to the best of my knowledge and understand that falsification, misleading, misrepresentation, or omission of any information submitted in connection with my application or interview, whether in this document or not, may result in rejection of my application or, if hired, in dismissal.

In consideration of my employment, I agree to conform to the rules and regulations of the City of Muskegon as they may be amended from time to time. I also agree that the contents of any office, locker, desk, or equipment or other City property I may use, and any of my own property I bring onto the City's premises (including, without limitation, cars, packages, and purses) may be inspected by the City at any time, and I waive any claims against the company or its agents relating to such inspection. I understand City employment is at will unless otherwise stated in a written City document.

I waive written notice from my current employer and from any of my former employers regarding the disclosure of disciplinary reports, letters of reprimand, or other notices of disciplinary action contained in my personnel records. This waiver is made pursuant to the Bullard-Plawecki Employee Right-to-Know Act.

I authorize my references and current and former employers listed in this application to give you any and all information concerning my current and previous employment and any pertinent information that they may have and release all parties from any liability for any damages that may result from furnishing same to you.

I authorize the City of Muskegon or its agents to release any information relating in any way to my employment, including disciplinary reports, letters of reprimand, or other notices of disciplinary action when such information is required by any prospective or subsequent employers without any obligation by them or you to give me any notice of such disclosure.

I understand that any employment offer is conditional upon the drug screening test results and the post-offer pre-employment medical examination, and I agree to submit to physical examinations permitted by law before and during my employment, at the request and expense of the City, and I agree to disclose all information lawfully requested at such examinations about my physical and mental condition and medical history. I waive any claims against the City or its agents relating to any such testing, or from lawful decisions made regarding my employment or termination of employment based upon the results of such testing or analysis.

If employed, I understand that if I am or become in need of accommodation(s) for employment, I must notify the City of Muskegon in writing within 182 days after the need is known or reasonably should have been known to me. Failure to properly notify the City will preclude any claim that the employer failed to make accommodation.

I have read, understand, and agree to the terms of each of the above statements.

Date Signature of Applicant

PRE-EMPLOYMENT DRUG TESTING CONSENT FORM

I, _____, understand that the City of Muskegon, Michigan has a policy against the use, sale, possession, or distribution of illegal drugs or being under the influence of illegal drugs by its employees and applicants for employment. I further understand that the City has adopted a pre-employment drug-testing program as a method of implementing that policy.

I hereby consent to the taking of my urine, hair, blood, or breath by the City or its agents for the purpose of the above drug-testing program, and the testing of such samples by a testing laboratory designated by the City. I hereby further consent to the release of any test reports on such samples to the City or its agents and to the use of all such reports by the City or its agents in its assessment of my employment application. I understand that my refusal to consent to such testing will result in my disqualification from further consideration for employment with the City.

I also understand that determining my suitability or fitness for employment is within the sole discretion of the City, and that a positive test finding will result in my disqualification from further consideration for employment.

It is understood that certain medications may be identified in any drug testing, and I have completed or will complete the "Confidential Prescription/Non-Prescription Medication Form," to the best of my recollection and belief for use in the drug test. This form will be completed by me and placed in a sealed envelope for the sole and exclusive use of the testing laboratory to help ensure the accuracy of the testing procedures.

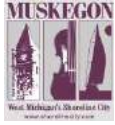
I release the City or its agents and the testing facility selected by the City, and the officers, directors, employees, and agents of each of the aforementioned, from any and all claims or potential claims or actions relating to such testing, including the taking of samples, the testing process, procedures, analysis, disclosure and utilization of the test results in considering my employment with the City.

Finally, I understand that, if hired, I am required to comply with the City's "Drug-Free Workplace Policy," and that my violation of said policy may result in disciplinary action, up to and including immediate termination.

My signature below acknowledges that I have read and understand this consent form, and I agree to be considered for employment with the City on the conditions set forth above.

Date

Signature of Applicant



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CITY OF MUSKEGON

THESE JOBS ARE CLASSIFIED AS SAFETY SENSITIVE POSITIONS SUBJECT TO THE DEPARTMENT OF TRANSPORTATION (DOT) RANDOM DRUG AND ALCOHOL TESTING PROGRAM:

Electronics Technician	Equipment Operator	Mechanic
Maintenance Worker I & II	Public Workers Supervisor	Sign Fabricator
Traffic Sign Maintenance Worker	Water/Sewer Maintenance Worker	
Inventory/Stockroom Clerk	Public Works Superintendent	

APPLICANTS FOR ANY OF THE ABOVE POSITIONS MUST COMPLETE THIS FORM!

1. Please indicate whether you have performed a safety sensitive function (for example, driver or mechanic) in the past two years: Yes No
2. If you answered "Yes" to Item 1 above, please provide the following information for each position held in the past two years:

<u>JOB TITLE</u>	<u>EMPLOYMENT DATES</u>	<u>EMPLOYER'S NAME & ADDRESS</u>	<u>PHONE NUMBER</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

The job for which you are applying is classified as a safety sensitive position subject to the Department of Transportation's (DOT) Random Drug and Alcohol Testing Program. Pursuant to regulations governing the program, the City of Muskegon, as a prospective employer, must obtain results about your prior participation in this mandated testing program with previous employers for the past two (2) years.

In order for the City to comply with this federal requirement, we must obtain the above-noted information on you. Your signature on the waiver below authorizes the release of this information. Failure to sign the waiver will be considered as an incomplete application and revocation of your original Agreement and Understanding authorizing the City to obtain information from your current and former employers .

Therefore, I hereby authorize my previous employer(s) to release the information to the City of Muskegon for the purpose of investigation as required by 49 CFR Part 382.413 of the Federal Highway Administration Regulations and discharge them from any and all liability which may result from releasing such information.

Applicant's Printed Name

Applicant's Signature

Date: _____

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**CITY OF MUSKEGON
BOARD OF CIVIL SERVICE COMMISSIONERS**

APPLICATION FOR VETERAN'S EMPLOYMENT PREFERENCE

The City of Muskegon provides for veteran's preference for applicants who have been in active service in the armed forces of the United States during a recognized war period or other recognized conflict as defined by federal law.

Applicant's Name

Last Name	M.I.	First Name
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I was discharged under less than honorable conditions. (If you checked this option, you are *not* eligible for veteran's preference points.)

I was discharged under honorable conditions.

I wish to claim Veteran's Preference in Employment.

NOTE: In order to claim Veteran's Preference, you must fill out this form and return it with your completed City of Muskegon employment application form.

Documentation substantiating your veteran's preference claim must be furnished at the time of application AND include a copy of your DD 214, Certificate of Discharge or Separation from Active Duty, or if you are currently enlisted, include a copy of your military enlistment papers.

Service Entry Date _____ - _____ - _____ **Discharge Date** _____ - _____ - _____

I wish to claim Veteran's Preference based on the following active duty:

- World War II: 12/7/41 to 4/28/52
- Korean Conflict: 6/27/50 to 1/31/55
- Vietnam Conflict: 2/28/61 to 5/7/75
- Grenada Expedition: 10/25/83 to 11/21/83
- Persian Gulf War: 7/24/87 to present
- Other

I certify that all information provided is true, correct, and complete to the best of my knowledge. I also understand that discovery of misrepresentation or omission of facts herein will make me ineligible for employment or be cause for immediate dismissal.

Printed Name

Signature

Date



VETERAN'S PREFERENCE:

Recognizing that sacrifices are made by those serving in the Armed Forces, veterans may receive preference over non-veterans in City hiring practices. Preference does not have as its goal the placement of a veteran in every vacant job; this would be incompatible with the merit principle of public employment. Veteran's preference points may be added to a passing final test score used for an open competitive referral for City employment. Entitlement to veteran's preference does not guarantee a job.

VETERAN'S PREFERENCE POINTS: 5 Points.

To claim veteran's preference, eligible veterans must meet the minimum training and experience requirements for the City position; must be capable of performing the essential duties of the job, with or without accommodation; and pass the City's Civil Service examination required for appointment. Veteran's preference may be used only once in gaining initial employment with the City of Muskegon

WHO IS ELIGIBLE?

The veteran must have served on full-time active duty* for 90 or more consecutive days in the United States Army, Navy, Air Force, Marines, or Coast Guard and have been in active service during a recognized war period or other recognized conflict as defined by federal law AND have received a form of honorable discharge/separation from the service prior to taking the civil service exam.

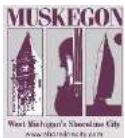
Anyone discharged or separated under less than honorable is NOT entitled to veteran's preference points.

*Note: Active duty for training CANNOT be counted as part of the 90-day service requirement for veteran's preference points, such as Guard and Reserve active duty for training.

WAR ERA VETERANS:

World War II	12/07/41 to 4/28/52
Korean Conflict	6/27/50 to 1/31/55
Vietnam Conflict	2/28/61 to 5/7/75 12/31/60 to 5/7/75
Bosnia	11/20/95 to present
El Salvador	1/1/81 to 2/1/92
Grenada Expedition	10/25/83 to 11/21/83
Lebanon Peacekeeping Mission	6/1/83 to 12/1/87
Panama Expedition	12/20/89 to 1/31/90
Persian Gulf War	7/24/87 to 8/1/90 12/1/95 to present
Iraq	1/1/97 to present

The above are examples of campaigns and expeditions and not an exhaustive listing of qualifying service.
071404



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THE CITY OF MUSKEGON, MICHIGAN IS AN "EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER"

YOU ARE NOT REQUIRED TO COMPLETE THIS FORM

The information you provide on this form is used only to study recruiting and employment patterns of the City of Muskegon and to determine whether information about City job opportunities is reaching all segments of the community. Your answers are used only to assist in future recruitment efforts.

Thank you,

CITY OF MUSKEGON BOARD OF CIVIL SERVICE COMMISSIONERS

=====
Title of job(s) applied for _____

Male Female

Highest level of education attained:

Race/Ethnic Group:

High School Diploma

American Indian or Alaskan Native

G.E.D.

Asian

1-3 years of college

Black or African American

Bachelor's degree in _____

Hispanic or Latino

MA/MS degree in _____

Native Hawaiian or other Pacific Islander

Doctorate degree in _____

Two or more races

Other degree in _____

White (Not of Hispanic Origin)

=====
How did you learn about this City employment?

City Employee

City job announcement Walk-in applicant

The Muskegon Chronicle

City web site

Professional Publication

Internet listing on _____

Career fair at _____

School placement office at _____

Other _____

=====
Date of Birth: _____

=====
Please indicate below the nature of any reasonable accommodation(s) you may require in order to perform the essential job functions, as you understand them to be, of the position for which you applied:

Your zip code _____ Today's date _____