

Submit completed application form to City of Bowling Green, Personnel Department via US Mail or hand-delivery to 304 North Church Street, Bowling Green, Ohio 43402. You may also send application materials via email to [BGPersonnel@bgohio.org](mailto:BGPersonnel@bgohio.org) or via fax to (419) 352-1262. You may reach the Personnel Department by phone at (419) 354-6200. Résumés may be included, but will not substitute for a completed application. AA/EEO

**Application for Employment-Parks & Recreation Temporary Part-Time Pool Positions  
City of Bowling Green, Ohio  
The City of Bowling Green is an Equal Opportunity Employer and a Drug Free Workplace**

The City considers applicants for positions without regard to race, color, religion, creed, gender/sex, national origin, age\*, disability, marital status, veteran status, military status, sexual orientation, political ideology, genetic information, or any other legally protected status. (\*Pursuant to the Federal Exemption to the ADEA and Ohio Law, age maximums are established when hiring entry-level Police Officers and Firefighters.)

**Notice to Applicants – A post-offer screening test for drug use may be required before hire and screening tests for both alcohol and drug use may be required during employment. Because of Ohio Public Records Law, the identity of applicants and application materials cannot be considered to be confidential. Application materials may be subject to disclosure under Ohio law. The application file for this position will be considered active only until such time as the vacancy is filled. You would be required to submit another application should you decide to apply for another City position.**

**PLEASE PRINT IN INK OR TYPE**

Title of Position(s) Applying for: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Present Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Permanent Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Have you ever worked under another name? Yes What name? \_\_\_\_\_ No

Are you a U.S. veteran? Yes No

Are you currently employed? Yes No

May we contact your current employer? Yes No N/A

Are you at least 18 years old? Yes No

If no, provide DOB: \_\_\_\_\_ (Parent/guardian must sign attached consent form for applicants under 18)

Have you previously worked at the City of Bowling Green? Yes No

If yes, list positions and dates of hire: \_\_\_\_\_

**Availability**

Date Available to Start Work: \_\_\_\_\_ Last Date Available to Work: \_\_\_\_\_

No. of days per week you can work \_\_\_\_\_ No. of hours per day you can work \_\_\_\_\_

Are you available to work the following? (Check all that apply):

Days Evenings Weekends Holidays

If there is any time when you expect to miss three or more consecutive shifts, please list the dates:

\_\_\_\_\_

When is your Spring Break? \_\_\_\_\_

Are you available for an interview over Spring Break? Yes No N/A

## Education and Training

1. Name of High School: \_\_\_\_\_

Address of High School: \_\_\_\_\_

Are you currently a high school student?                      Yes                      No

If yes, what will be your highest grade completed in at the end of the current school year: \_\_\_\_\_

If no, did you graduate?                      Yes                      No                      N/A                      GED

2. Colleges/Universities Attended (List each College/University separately; list most recent first):

A. Current or most recent undergraduate College or University: \_\_\_\_\_

Address: \_\_\_\_\_

Number of Years Completed: \_\_\_\_\_ Degree Earned:                      Yes                      No

Type of Degree Earned: \_\_\_\_\_ Course of Study: \_\_\_\_\_

B. Other College or University attended: \_\_\_\_\_

Address: \_\_\_\_\_

Number of Years Completed: \_\_\_\_\_ Degree Earned:                      Yes                      No

Type of Degree Earned: \_\_\_\_\_ Course of Study: \_\_\_\_\_

C. Are you taking summer classes for any college or university?

Yes                      No                      (*Attach summer schedule, if applicable*)

### Current Certifications & Expiration Dates:

Lifesaving (exp. \_\_\_\_\_)                      First Aid (exp. \_\_\_\_\_)                      W.S.I. (exp. \_\_\_\_\_)

C.P.R. (exp. \_\_\_\_\_)                      Adv. First Aid (exp. \_\_\_\_\_)

Are you prevented from lawfully becoming employed in the United States because of visa or immigration status?

Yes                      No (*Proof of citizenship or immigration status will be required upon employment*)

Can you perform the essential functions of the job, as described in the job description, with or without reasonable accommodations?

Yes                      No

### Personal References

List two persons that you have known for at least two years, other than supervisors or relatives, who have knowledge of your work and/or education experience.

Name    Address    Phone Number

\_\_\_\_\_  
\_\_\_\_\_

**EMPLOYMENT EXPERIENCE:** Start with most recent or current employer. Include military service or any job-related volunteer activities. You should exclude organizations that indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer's Name (Company Name): \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title(s) Held: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_  
Employment Period: Month/Year \_\_\_\_\_ To: Month/Year \_\_\_\_\_  
Hours Worked per Week: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Quit with Notice \_\_\_\_\_ Quit-No Notice \_\_\_\_\_ Seasonal or Temporary Employment Ended  
\_\_\_\_\_ Laid Off \_\_\_\_\_ Terminated (State reason): \_\_\_\_\_  
Description of Duties and Responsibilities:

Employer's Name (Company Name): \_\_\_\_\_  
Address: \_\_\_\_\_  
Job Title(s) Held: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_  
Employment Period: From: Month/Year \_\_\_\_\_ To: Month/Year \_\_\_\_\_  
Hours Worked per Week: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Quit with Notice \_\_\_\_\_ Quit-No Notice \_\_\_\_\_ Seasonal or Temporary Employment Ended  
\_\_\_\_\_ Laid Off \_\_\_\_\_ Terminated (State reason): \_\_\_\_\_  
Description of Duties and Responsibilities:

Employer's Name (Company Name): \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Job Title(s) Held: \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_ Supervisor's Phone: \_\_\_\_\_  
Employment Period: From: Month/Year \_\_\_\_\_ To: Month/Year \_\_\_\_\_  
Hours Worked per Week: \_\_\_\_\_ Rate of Pay: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_ Quit with Notice \_\_\_\_\_ Quit-No Notice \_\_\_\_\_ Seasonal or Temporary Employment Ended  
\_\_\_\_\_ Laid Off \_\_\_\_\_ Terminated (State reason): \_\_\_\_\_  
Description of Duties and Responsibilities:

**Please list below any other education, experience, honors, or certifications or extra-curricular activities you consider significant:**

INFORMATION ABOUT LABOR LAWS FOR MINORS & PARENT PERMISSION SLIP

- “Minor” means any person less than 18 years of age.
- The minimum age for employment with the City of Bowling Green Parks and Recreation Department is 16 years old.
- Minors ages 16 and 17 shall not be required to provide a work permit after the last day of school in the spring and before the first day of the school term in the fall (in non-hazardous employment.) **If minors ages 16 and 17 work during any part of the school year including training days and orientation days, a work permit must be obtained prior to work.**
- 18 year olds are not required to obtain work permits, even if they are still attending high school.
- **All** minors must provide the following to the City on or prior to the first day of work:
  1. A birth certificate from the Bureau of Vital Statistics (**NOT** a hospital birth certificate)
  2. A photo identification card (driver’s license, state ID, or school ID card)
  3. Their ORIGINAL Social Security Card
  4. A work permit, if applicable
  5. Parental permission slip below

All employees, regardless of age, are required to complete new hire paperwork prior to beginning employment.

In addition, all employees, regardless of age, are required to have direct deposit of payroll. Bank account information must be provided to the City at the time of hire. Direct deposit can either be made into a single checking or savings account or multiple accounts, if desired.



Parental Permission-Tear off and return this portion with the employment application.

I hereby give \_\_\_\_\_ permission to be employed by the City of Bowling Green’s Parks & Recreation Department.

I understand that signing this consent form does not guarantee employment for my child. I understand that none of the documents, policies, procedures, actions, or statements of the City of Bowling Green or its employees or representatives used during the hiring process or during employment may be deemed to be a contract for employment, either actual or implied. I understand that no employee or representative, other than the Mayor of the City of Bowling Green, has the authority to enter into any agreement contrary to the above and that any such agreement if made shall not be binding unless it is set out in writing, signed by the Mayor of the City of Bowling Green.

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Relationship to Minor

\_\_\_\_\_  
Date Signed

**Please Read Carefully Before Signing – Applicant’s Certification and Agreement**

I hereby certify that the information and facts set forth in this application are true, complete without omission to the best of my knowledge. I understand that any falsifications, misrepresentations or omissions of any facts in this application or other documents submitted for consideration of employment will be cause for denial of employment or immediate termination of employment, if employed regardless of the timing or circumstances of discovery.

I understand that if I am hired this Application becomes a part of my official employment record. The application supercedes any other applications previously filed with the City of Bowling Green.

I authorize the City of Bowling Green to investigate any or all information provided or known. I understand that any falsification or omission of material facts in my application may be sufficient cause for disqualification or termination of employment with the City of Bowling Green. I hereby authorize any and all schools, employers, references, regulatory boards, courts and any others who have information about me to provide such information to the City of Bowling Green and/or any of its employees, representatives, agents or vendors. I release any such person, company, institution, or government agency from any liability for any and all damage that may result from providing and/or furnishing such information to the City of Bowling Green with regard to this application for employment.

I understand that prior to hire the City conducts background investigations of selected candidates. Temporary hires must submit to the background investigation process or to pre-employment drug testing if the job duties include driving City vehicles or working directly with children. As part of the criminal records check process, those personnel who will work with children will be required to submit to a fingerprint check. I understand that failing the post-offer drug test will result in the City immediately rescinding the job offer tendered to me or the termination of employment, if I am already employed. I further understand that failing the post-offer medical examination may result in my disqualification for the specific job for which I am being considered. For positions which require driving a City vehicle, I understand that I must be insurable with the City’s insurance carrier. Additionally, if the position for which I am hired requires me to maintain a Commercial Driver’s License (CDL), I understand that I will be subject to not only pre-employment drug testing, but also random, post-accident, return-to-duty, and follow-up drug and alcohol testing in accordance with the rules established by the Federal Government. I agree to wear or use any protective clothing or devices, as required, and to abide by all established safety rules. I agree to comply with all City rules, regulations, and policies. I understand that workdays, hours of work, and/or location of my job or duties may be reassigned at the discretion of City management.

I understand that submission of an application does not guarantee employment. I further understand that should an offer of employment be made by the City of Bowling Green, such offer whether or not stated, is for employment at will, and that if I accept such offer, my employment may be terminated by either the City of Bowling Green or myself at any time, with or without cause or notice. I understand that none of the documents, policies, procedures, actions, or statements of the City of Bowling Green or its employees or representatives used during the hiring process or during my employment may be deemed to be a contract for employment, either actual or implied. I understand that no employee or representative, other than the Mayor of the City of Bowling Green, has the authority to enter into any agreement contrary to the above and that any such agreement if made shall not be binding unless it is established in writing and signed by the Mayor of the City of Bowling Green. I understand that the application filed for this position will be active only until such time as the vacancy is filled. I would be required to submit another application should I decide to apply for another City position.

In consideration of the City of Bowling Green’s review of my application, I agree that any claim or lawsuit arising out of my employment with or application for employment with the City of Bowling Green must be filed no later than six (6) months after the date of employment action that is subject of the claim or lawsuit. While I understand that the statute of limitations for claims arising out of an employment action may be longer than six (6) months, I agree to be bound by the six (6) month period of limitations set forth herein and I waive any statute of limitations to the contrary. Should a court determine in some future lawsuit that this provision allows an unreasonably short period of time to commence a claim or lawsuit, the court shall enforce this provision so far as possible and shall declare the lawsuit barred unless it was brought within the minimum reasonable time within which the claim or suit should have commenced.

In consideration of employment, if offered, I agree to abide by and adhere fully to all rules, regulations, policies and procedures of the City of Bowling Green at all times. I further understand that the rules, regulations, policies and procedures may be changed at any time, with or without notice.

**I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE STATEMENTS AND CONDITIONS.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

**CITY OF BOWLING GREEN  
REASONABLE ACCOMMODATION REQUEST FORM**

Name: \_\_\_\_\_  
*(Please Print)*                      Last    First    Middle Initial

Daytime Phone: \_\_\_\_\_

Position Title Applied for or City Program/Service: \_\_\_\_\_  
\_\_\_\_\_

I am either an applicant for the position named above or I am interested in the City program/service listed above, and may require Reasonable Accommodation. I hereby request that either the Personnel Department contact me regarding reasonable accommodation in the application and/or testing process, or the appropriate City department contact me regarding reasonable accommodation regarding the program/service I have noted above. I authorize the Personnel Department and/or appropriate City Department to verify this request.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

PLEASE DESCRIBE BELOW THE ACCOMODATION YOU MAY REQUIRE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This information shall be used for Affirmative Action (AA) Purposes only

**EQUAL EMPLOYMENT OPPORTUNITY DATA SHEET**

**TO ALL APPLICANTS:** The CITY OF BOWLING GREEN is an Equal Opportunity/Affirmative Action employer. The City has received Federal and State grants and is therefore required to maintain information, separate from the application form, on individuals who apply for employment. We invite you to provide this information about yourself by completing this form.

**PROVIDING THIS INFORMATION IS STRICTLY VOLUNTARY. IF YOU CHOOSE NOT TO PROVIDE IT, THERE WILL BE NO ADVERSE EFFECT ON YOUR CONSIDERATION FOR EMPLOYMENT.**

(PLEASE PRINT- USE PEN OR TYPE)

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|           |            |                |      |
|-----------|------------|----------------|------|
| Last Name | First Name | Middle Initial | Date |
|-----------|------------|----------------|------|

**POSITION APPLYING FOR:** \_\_\_\_\_

**INSTRUCTIONS:** Indicate the appropriate response for items A – J (Race and Ethnicity Identifiers are established by the Federal government for EEO Reporting)

**A. Race/Ethnicity**

- White (not Hispanic or Latino)
- Black or African-American (not Hispanic or Latino)
- American Indian or Alaskan Native (not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)
- Asian (not Hispanic or Latino)
- Two or more races, (not Hispanic or Latino)
- Hispanic or Latino (A Person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.)

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**Ethnicity**

Hispanic or Latino - (A Person of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture or origin, regardless of race.)

**Race**

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

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 Alaskan 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 maintains tribal affiliation or community recognition.

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

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**B. Gender/Sex**

- Female       Male
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**VETERAN INFORMATION****C. Veteran of the Vietnam Era**     Yes     No

1. 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:
  - a. In the Republic of Vietnam between Feb 28, 1961, and May 7, 1975; or
  - b. Between August 5, 1964, and May 7, 1975, in all other cases; or
2. Was discharged or released from active duty for a service-connected disability if any part of such active duty was performed:
  - a. In the Republic of Vietnam between Feb 28, 1961 and May 7, 1975; or
  - b. Between August 5, 1964, and May 7, 1975, in all other cases.

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**D. Other Protected Veteran**     Yes     No

A person who served on active duty during a war or in a campaign or expedition for which a campaign badge has been authorized, under laws administered by the Department of Defense

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**E. Recently Separated Veteran**

1. Any veteran during a one-year period beginning on the date of such veteran's discharge or release from active duty.  
 Yes     No    Date of Discharge: \_\_\_\_\_; or,
2. Any veteran during the three-year period beginning on the date of such veteran's discharge or release from active duty in the U. S. military, ground, naval, or air service.     Yes     No    Date of Discharge: \_\_\_\_\_

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**F. Special Disabled Veteran**     Yes     No

1. 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 Veteran's Affairs for a disability:
  - a. Rated at 30 percent or more; or
  - b. 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
2. A person who was discharged or released from active duty because of a service-connected disability.

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**G. Disabled Veteran**     Yes     No

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.

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**H. Armed Forces Service Medal Veteran**     Yes     No

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 Service medal was awarded pursuant to Executive Order 12985.

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**I. Other Protected Veteran**     Yes     No

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 military badge was authorized, under the laws administered by the Department of Defense

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**J. Method of referral for employment at the City of Bowling Green (Check One)**

- Walk In     Referral by City Employee
- Referral by Ohio Jobs and Family Service     Job posting at school, which school: \_\_\_\_\_
- Newspaper Advertisement, which newspaper: \_\_\_\_\_
- Web Page, which web page: \_\_\_\_\_
- Referred By Employment Agency, which: \_\_\_\_\_
- Other, explain: \_\_\_\_\_

The City of Bowling Green is an equal opportunity employer and considers all applicants for employment based on non-discriminatory, job-related factors. You should contact the City of Bowling Green's Personnel Department by phone at (419) 354-6200 or by e-mail at [BGPersonnel@bgohio.org](mailto:BGPersonnel@bgohio.org) for information or assistance in recruitment or employment.

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## Voluntary Self-Identification of Disability

Form CC-305  
OMB Control Number 1250-0005  
Expires 1/31/2020  
Page 1 of 2

### Why are you being asked to complete this form?

Because we do business with the government, we must reach out to, hire, and provide equal opportunity to qualified people with disabilities.<sup>1</sup> To help us measure how well we are doing, we are asking you to tell us if you have a disability or if you ever had a disability. Completing this form is voluntary, but we hope that you will choose to fill it out. If you are applying for a job, any answer you give will be kept private and will not be used against you in any way.

If you already work for us, your answer will not be used against you in any way. Because a person may become disabled at any time, we are required to ask all of our employees to update their information every five years. You may voluntarily self-identify as having a disability on this form without fear of any punishment because you did not identify as having a disability earlier.

### How do I know if I have a disability?

You are considered to have a disability if you have a physical or mental impairment or medical condition that substantially limits a major life activity, or if you have a history or record of such an impairment or medical condition.

Disabilities include, but are not limited to:

- Blindness
- Autism
- Bipolar disorder
- Post-traumatic stress disorder (PTSD)
- Deafness
- Cerebral palsy
- Major depression
- Obsessive compulsive disorder
- Cancer
- HIV/AIDS
- Multiple sclerosis (MS)
- Impairments requiring the use of a wheelchair
- Diabetes
- Schizophrenia
- Missing limbs or partially missing limbs
- Intellectual disability (previously called mental retardation)
- Epilepsy
- Muscular dystrophy

Please check one of the boxes below:

- YES, I HAVE A DISABILITY (or previously had a disability)
- NO, I DON'T HAVE A DISABILITY
- I DON'T WISH TO ANSWER

\_\_\_\_\_  
Your Name

\_\_\_\_\_  
Today's Date

## Voluntary Self-Identification of Disability

Form CC-305  
OMB Control Number 1250-0005  
Expires 1/31/2020  
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### Reasonable Accommodation Notice

Federal law requires employers to provide reasonable accommodation to qualified individuals with disabilities. Please tell us if you require a reasonable accommodation to apply for a job or to perform your job. Examples of reasonable accommodation include making a change to the application process or work procedures, providing documents in an alternate format, using a sign language interpreter, or using specialized equipment.

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<sup>i</sup> Section 503 of the Rehabilitation Act of 1973, as amended. For more information about this form or the equal employment obligations of Federal contractors, visit the U.S. Department of Labor's Office of Federal Contract Compliance Programs (OFCCP) website at [www.dol.gov/ofccp](http://www.dol.gov/ofccp).

**PUBLIC BURDEN STATEMENT:** According to the Paperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This survey should take about 5 minutes to complete.