

# WEST TRAVERSE TOWNSHIP

PO BOX 528  
HARBOR SPRINGS MI 49740  
(231) 526-7361  
[www.westtraversetownship.com](http://www.westtraversetownship.com)

## Application for Seasonal Employment at the Thorne Swift Nature Preserve

(West Traverse Township operates the Thorne Swift Nature Preserve, employs the staff at the Thorne Swift Nature Preserve, and is an equal opportunity employer.)

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Current Address:** \_\_\_\_\_

Street Apt# City & State Zip Code

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ **Cell Phone:** (\_\_\_\_\_) \_\_\_\_\_

**Permanent Address:** \_\_\_\_\_

( If different than current address) Street Apt# City & State Zip Code

**Phone:** (\_\_\_\_\_) \_\_\_\_\_ **Email:** \_\_\_\_\_ @ \_\_\_\_\_

**Are you 18 years of age or older?** Yes ( ) No ( )

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

**Days available to work** (circle all that apply): **M T W Th F Sa Su**

**Hours available:** \_\_\_\_\_ **Date available to begin:** \_\_\_\_\_

**Any physical restrictions?** Yes ( ) No ( ) If yes, explain:

\_\_\_\_\_

**Have you ever been convicted of a crime other than minor traffic offenses?** Yes ( ) No ( )

If yes, explain: \_\_\_\_\_

**Do you have reliable transportation?** Yes ( ) No ( )

### Education:

Education Type	Name & Address	Yrs. Attended	Major(s)	Grad. Yr/Degree
High School				
College				
Post Grad.				
Other				

**In case of emergency, notify:**

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_

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

Street Apt# City & State Zip Code

**Phone #:** (\_\_\_\_\_) \_\_\_\_\_ **Alternate #:** (\_\_\_\_\_) \_\_\_\_\_

**Employment History:** (Begin with your last job and work back. Use an additional sheet if needed.)

Employer & Address	From (Mth/Yr)	To (Mth/Yr)	Position	Reason for Leaving	Contact Information (Name, Phone,E-mail)

**Personal References:** (At least two (2), excluding relatives)

Name	Occupation	Home Address & Telephone Number

**Please list here, or include in your attached resume, any special skills or qualifications you have that might be pertinent to employment at the Thorne Swift Nature Preserve:**

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**Please read each statement carefully before signing this application:**

I hereby attest to the truth of all statements and information provided on this application..

I authorize investigation and confirmation of all statements herein, including any checks of criminal records. I authorize all previous employers or persons having information concerning me or my record to report such information to West Traverse Township. I release each such person from all claims or liabilities whatsoever on account of making such inquiry or making disclosures whether favorable or unfavorable.

I understand that, if employed, I would be an at-will employee, which means that I would have the right to terminate my employment at any time with or without cause, and West Traverse Township would have the same right.

I understand that any agreement of employment pursuant to this application would need to be in writing and signed by the West Traverse Township Supervisor and myself to be effective.

I also understand that misrepresentations or falsifications of information herein or in other documents completed or submitted by me will result in dismissal regardless of the date of discovery by West Traverse Township.

If accepted for employment, I agree to devote my best efforts to the performance of all required duties, to comply with all rules, regulations, policies, and procedures of West Traverse Township, and to obey the lawful supervision of the Thorne Swift Nature Center manager.

**By signing my name below, I hereby agree to the above statements.**

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

**Please return completed application and resume by mail to the above address, by fax to (231) 526-0028, or by e-mail to [secretary@westtraversetownship.com](mailto:secretary@westtraversetownship.com).**