



Village of Thornville

1 South Main Street
PO BOX 607
Thornville, OH 43076

Phone: 740-246-6020
Fax: 740-246-5044
Website: thornville.gov

Employment Application

Date:

Name: _____
Last First Middle Maiden

Mailing Address: _____
Street (P.O. Box) City State Zip

Number of Years at this Address:

If less than 6 month, list previous address:

Telephone Number:

Are you age 18 or over? Yes No

Position Applied For: Salary/Wage Desired:

Available Start Date:

EDUCATION

High School: Number of Years Completed:

School Location:

College: Number of Years Completed:

School Location:

Business or Trade School: Number of Years Completed:

School Location:

Do you have a Valid Driver's License: Yes No

Do you have a reliable means of transportation to work: Yes No

