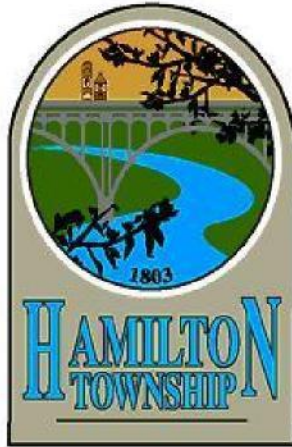


Hamilton Township



We Are Hiring

Director of Economic Development and Zoning

We have an opening for a qualified and energetic Director of Economic Development and Zoning who is looking for a career position with Hamilton Township.

Job description and Application is posted

<http://www.hamilton-township.org/>

Deadline for application with resume and cover letter

May 17 , 2019 @ 4:30pm

Hamilton Township

POSITION TITLE:	Director of Economic Development and Zoning
DEPARTMENT:	Administration
SUPERVISOR:	Administrator
CLASSIFICATION:	Exempt
SALARY RANGE:	\$65,000 - \$75,000 (DOQ)

Hamilton Township (population of 25,000+) seeks a Director of Economic Development and Zoning, that will provide expert advice, support, and assistance in planning, is responsible for overseeing and co-leading the development and negotiation of agreements and contracts for projects undertaken by Planning and Zoning. Work involves the use of initiative and independent judgment within the framework of established policies and procedures. The incumbent will direct and coordinate the efforts of various economic development or redevelopment projects, workforce employment programs, and other professional and administrative support teams. For the detailed job description please visit www.hamilton-township.org . A minimum of a Bachelor's degree in economics, business administration, public administration, urban development, urban planning or a related field is required

Selection Guidelines

- Formal application
- Rating of education and experience
- Oral interview
- Background check
- CVSA
- Drug and Alcohol test;
- Job related tests may be required.

Applications can be obtained online at www.hamilton-township.org or by calling 513-683-8520 and speaking with Kellie Krieger, Human Resources Manager or emailing her [at **kkrieger@hamilton-township.org**](mailto:kkrieger@hamilton-township.org). Deadline for application with resume and cover letter May 17, 2019 @ 4:30pm.



Hamilton Township

P.O. Box 699 7780 South
State Route 48
Maineville, OH 45039
(513 683-8520)

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #
City State ZIP Code

Phone: () E-mail Address:

Date Available: Social Security No.: Desired Salary: \$

Position Applied for:

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this company? YES NO
If yes, when?

Have you ever been convicted of a felony? YES NO
C I C I

If yes, explain:

Education

High School: Address: YES NO
From: To: Did you graduate? I:1 Degree:

College: Address: YES NO
From: To: Did you graduate? E I Degree:

Other: Address: YES NO
From: To: Did you graduate? 11=1 Degree:

References

Please list three professional references.

Full Name: Relationship:
Company: Phone: ()
Address:

Full Name: Relationship:
Company: Phone: ()
Address:

Full Name: Relationship:
Company: Phone: ()
Address:

Previous Employment

Company: _____ Phone: (_____)
Address: Job _____ Supervisor: _____
Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: Job _____ Supervisor: _____
Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Military Service

Branch: _____ From: _____ To: _____
Rank at Discharge: _____ Type of Discharge: _____
If other than honorable, explain: _____

Disclaimer and Signature

Hamilton Township is an Equal Opportunity Employer and a Drug Free Workplace

I certify that my answers are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 6 months. Any applicant wishing to be considered for employment beyond this time should inquire as to whether or not applications are being accepted at that time.

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. understand, also, that **1 may be required to undergo a Physical Agility Test, Psychological Profile, Polygraph, Medical Physical, including a Drug/Alcohol Examination.***

Signature: _____ Date: _____



Hamilton Township

Applicant Release of Background Information Form

I, _____ residing at _____ for the last _____(years / months), have applied for employment with Hamilton Township _____ Department. I have been advised and understand that a representative of Hamilton Township will be conducting a thorough investigation of my background to assist in determining my eligibility for this employment. I realize that, in conducting this background investigation, officers will be making inquiries of: officials and records offices at schools which I have attended; police or courts with whom I may have an arrest or conviction record; present and previous employers; and, any other persons who may be able to provide information about me which Hamilton Township desires.

I hereby, expressly release and waive all provisions of state and federal law which may forbid disclosure of information from any school official, court, police agency, employer, firm or person, from disclosing any knowledge or information they have concerning me which is requested by Hamilton Township. I further consent that Hamilton Township, or their representative, be provided a copy of any such record concerning me upon request.

I further release, discharge, exonerate Hamilton Township and Hamilton Township Trustee Board, Warren County, Ohio, its agents, officers, representatives, and any person, agency, company, organization, or firm furnishing information from any and all liabilities of every nature arising out of the furnishing or inspection of such documents, records, and other information, or the investigation made by or on behalf of Hamilton Township.

I hereby request and authorize the Department of the _____ (Air Force, Army, Coast Guard, Marines, or Navy) to furnish Hamilton Township the records of each period of my service, and furnish the character of services rendered. My service number is/was _____

I understand that a screening committee will review my background investigation and determine my eligibility for appointment. All other civilian backgrounds are reviewed to determine eligibility.

I recognize the right of Hamilton Township to treat, at its discretion, certain sources of information as confidential, and its right to withhold from me or my agent the names of such confidential informed sources, and information obtained therefrom.

A photocopy of this authorization is to be accepted the same as the original.

(Printed name of Applicant)

(Signature of Applicant)

SSN: _____

Witness (Notary Seal Preferred)

Date: _____