

FAIRFIELD TOWNSHIP
RESOLUTION NO. 20-180

**RESOLUTION TO APPOINT JOHN BEATTIE AS A FULL-TIME SERVICE DEPARTMENT
EMPLOYEE, AT AN HOURLY RATE OF \$21.64, EFFECTIVE HIRE DATE
OCTOBER 28, 2020, WITH A 12-MONTH PROBATIONARY PERIOD.**

WHEREAS: The Administrator has indicated an immediate need for a full-time employee in the Service Department; and

WHEREAS: The Service Department Supervisor has recommended hiring John Beattie as a full time Service Department employee;

NOW, THEREFORE, BE IT RESOLVED, by the Board of Trustees of Fairfield Township, Butler County, Ohio, as follows;

SECTION 1: The Board hereby approves the appointment of John Beattie as a full-time Service Department worker with the job description set forth on the attached Exhibit "A", at an hourly rate of \$21.64 hour, with a 12-month probationary period.

SECTION 2: The Board hereby dispenses with the requirement that this resolution be read on two separate days, pursuant to RC 504.10, and authorizes the adoption of this resolution upon its first reading.

SECTION 3 This resolution is the subject of the general authority granted to the Board of Trustees through the Ohio Revised Code and not the specific authority granted to the Board of Trustees through the status as a Limited Home Rule Township.

SECTION 4: That it is hereby found and determined that all formal actions of this Board concerning and relating to the passage of this Resolution were taken in meetings open to the public, in compliance with all legal requirements including §121.22 of the Ohio Revised Code.

SECTION 5: This resolution shall take effect at the earliest period allowed by law.

Adopted: October 28, 2020

Board of Trustees

Shannon Hartkemeyer:

Shannon Hartkemeyer

Joe McAbee:

Joe McAbee

Susan Berding

Susan Berding

Vote of Trustees

yes

yes

yes

AUTHENTICATION

This is to certify that this is a resolution which was duly passed and filed with the Fairfield Township Fiscal Officer this 28th day of October, 2020.

ATTEST:

Shelly Schultz

Shelly Schultz, Fairfield Township Fiscal Officer

APPROVED AS TO FORM:

L.E. Barbieri

Lawrence E. Barbieri, Township Law Director



COL YES (RYAN)
FAIRFIELD TOWNSHIP, BUTLER COUNTY, OHIO
6032 Morris Road, Fairfield Twp., Ohio 45011
Employment Application

APPLICANT INFORMATION

Last Name BeaHe First John M.I. R Date 10/6/2020
Street Address 445 Marsh Dr. Apartment/Unit #
City Fairfield State Ohio ZIP 45014
Phone _____ E-mail Address _____
Date Available will discuss Desired Salary will discuss
Position Applied for _____ Type of employment desired: ☒ Full-Time ☐ Part-Time ☐ Seasonal
Referral Source: ☒ Advertisement ☐ Job line ☐ Relative ☐ Employment Agency
☐ Walk-in ☐ Employee ☐ Friend ☐ Other
Do you have any relatives working for Fairfield Township? YES ☐ NO ☒ If so, who?
Have you worked for Fairfield Twp before? YES ☐ NO ☒ If so, when?
Do you currently have a CDL? YES ☒ NO ☐
Are you a citizen of the United States? YES ☒ NO ☐ If no, are you authorized to work in the U.S.? YES ☐ NO ☐

EMPLOYMENT HISTORY

Provide the following information from your past and current employers, assignments, or volunteer activities, starting with your most recent. Explain any gaps in employment in the comments section below.

Employer Wausau Paper essity Phone 513-424-2999
Address 700 Colambra Ave Supervisor Tom Barlow
Job Title 3rd Hand Starting Salary \$ 23.46 Ending Salary \$ 25.01
Responsibilities finsh paper production, maintain crane operation.
From 12/18 To present Reason for Leaving will discuss.
May we contact your previous supervisor for a reference? YES ☒ NO ☐

Employer Pumpke Waste Management Phone 1-800-828-8171
Address 10795 Hughes Rd. Supervisor Walt Stepinek
Job Title Trash Collector/Driver Starting Salary \$ 12.00 Ending Salary \$ 14.00
Responsibilities Pick up customers trash & drive waste truck.
From 06/18 To 12/18 Reason for Leaving Better Day
May we contact your previous supervisor for a reference? YES ☒ NO ☐

Employer Compressed Air Tech Phone 513-539-5155
Address 120 Lawton Ave Supervisor Dennis Come
Job Title Service Tech Starting Salary \$ 12.00 Ending Salary \$ 16.50
Responsibilities Troubleshoot & maintain Industrial Air compressor.
From 12/16 To 4/18 Reason for Leaving _____
May we contact your previous supervisor for a reference? YES ☐ NO ☐

COMMENTS including explanation of any gaps in employment.

SKILLS, QUALIFICATIONS & CERTIFICATIONS

Summarize any special training, skills, licenses, and / or certifications that may qualify you as being able to perform job-related functions in the position for which you are applying.

CDL Class B
HVAC EPA 608

EDUCATION

High School *Fairfield High* Address *8800 Holden Blvd*
From *08/07* To *05/11* Did you graduate? YES ☒ NO ☐ Degree *High School Diploma*

College Address
From To Did you graduate? YES ☐ NO ☐ Degree

Other *D Russell Lee* Address *3603 Homibou - Middletown Rd*
From *04/13* To *12/13* Did you graduate? YES ☒ NO ☐ Degree *HVACR / EPA 608*

REFERENCES

Please list three professional references that are not related to you and are not previous supervisors. If not applicable, list three personal references that are not related to you.

Full Name *Donald B. Singhoff* Relationship *Friend*
Company *General Electric* Phone *513-500-6767*
Address

Full Name *Heath Maguire* Relationship *Friend*
Company *Wausau Paper* Phone *513-544-9048*
Address

Full Name *Michael Johnson* Relationship *Super Visor*
Company *Wausau Paper* Phone *513-571-4098*
Address

ADDITIONAL INFORMATION: ORGANIZATIONS

List professional, trade, business, or civic associations and any offices held. Exclude memberships which would reveal sex, race, religion, national origin, age, color, disability, or any other similarly protected status

ORGANIZATION

OFFICES HELD

ADDITIONAL INFORMATION: AWARDS

List special accomplishments, publications, awards, etc. Exclude information which would reveal sex, race, religion, national origin, age, color, disability, or any other similarly protected status

ADDITIONAL INFORMATION: OTHER

List any additional information that you would like us to consider. Exclude information which would reveal sex, race, religion, national origin, age, color, disability, or any other similarly protected status

☒ CRIMINAL BACKGROUND CHECK

If this box is checked, the applicant shall be required to complete a BCI/NCIC background check through the County Sheriff's office of their place of residence. This process will be at the applicant's expense.

DISCLAIMER AND SIGNATURE

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

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I understand that if I meet all requirements and characteristics as indicated in the job description, hiring may be contingent upon successful completion of drug and alcohol test, a credit report, and medical examination. These costs will be borne by the Township.

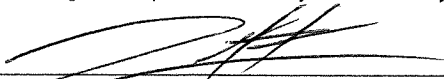
I understand that if employed:

- I may be required to work additional or fewer hours at other than my current assignment as the needs of the Township require.
- My employment is subject to complying with those rules, regulations, and conditions as established by management.
- I will be required to conform to all existing and future policies and procedures of Fairfield Township.
- Fairfield Township reserves the right to change wages, hours, and working conditions, as deemed necessary.

I understand that if I am offered employment that I must provide appropriate documentation of my eligibility to work in the United States, in compliance with the Immigration Reform and Control Act. I also understand that if I fail to provide the documentation required by law prior to my first day of employment, I will not be allowed to begin work, and the offer of employment may be rescinded.

I understand that no employee is authorized to offer me employment, promise me salary increases, change of position, advancement, or any other advantages except those officially announced by the Fairfield Township Board of Trustees.

Signature



Date 10/06/2020

Equal Employment Opportunity Statement

Fairfield Township provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, disability, genetic information, marital status, amnesty, or status as a covered veteran in accordance with applicable federal, state and local laws. Fairfield Township complies with applicable state and local laws governing non-discrimination in employment in every location in which the Township has facilities. This policy applies to all terms and conditions of employment, including, but not limited to, hiring, placement, promotion, termination, layoff, recall, transfer, leaves of absence, compensation, and training.

Fairfield Township expressly prohibits any form of unlawful employee harassment based on race, color, religion, gender, sexual orientation, gender identity or expression, national origin, age, genetic information, disability, or veteran status. Improper interference with the ability of Fairfield Township employees to perform their expected job duties is absolutely not tolerated.



AUTHORIZATION OF RELEASE OF INFORMATION AGREEMENT

TO WHOM IT MAY CONCERN: I am an applicant for employment with Fairfield Township, Butler County, Ohio. The Township needs to thoroughly investigate my employment background and personal history to evaluate my qualifications to hold the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to Fairfield Township, Butler County, Ohio.

I hereby authorize any representative of Fairfield Township bearing this release to obtain any information in your files pertaining to my employment and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of Fairfield Township, Butler County, Ohio, whether said records are of a public, private, or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure. I reiterate and emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for Fairfield Township, Butler County, Ohio to consider in determining my stability for employment. It is my specific intent to provide access to personal information, however, personal or confidential it may appear to be.

CHECK THE APPLICABLE RELEASE SECTION

☒ **Check here if applying for a non-law enforcement position**

I authorize any investigator or duly accredited representative of [employer] bearing this release to obtain any information from schools, residential management agents, employers, criminal justice agencies, or individuals, relating to my activities. This information may include, but is not limited to, academic, residential, achievement, performance, attendance, personal history, disciplinary, arrest, and conviction records. I hereby direct you to release such information upon request of the bearer. I understand that the information released is for official use by [employer] and may be disclosed to such third parties as necessary in the fulfillment of official responsibilities.

☐ **Check here if applying for a law enforcement position**

I consent to your release of any and all public and private information that you may have concerning me, my work history, my background and reputation, my military service records, educational records, my financial status, my criminal history record including my arrest records, whether or not convicted, any information contained in investigatory files, efficiency ratings, complaints or grievances, filed by or against me, either criminal or civil, in which I presently have, or have had an interest, attendance records, polygraph or other truth verification examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential and/or sealed, notwithstanding any other agreements that I may have signed.

Name John Ryan Buntke

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records including officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the representative of Fairfield Township, Butler County, Ohio regardless of any agreement I may have made with you previously to the contrary. Fairfield Township, Butler County, Ohio will discontinue processing my application if you refuse to disclose the information requested.

For and in consideration of Fairfield Township, Butler County, Ohio's acceptance and processing my application for employment, I agree to hold Fairfield Township, Butler County, Ohio, their agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with Fairfield Township, Butler County, Ohio. I understand that should information of a serious criminal nature surface as a result of this investigation, the information will be turned over to the proper authorities.

I understand my rights under Title 5, United States Code, Section 552a, the Privacy Act of 1974, with regard to access and to disclosure of records, and I waive those rights with the understanding that information furnished will be used by Fairfield Township, Butler County, Ohio in conjunction with employment procedures.

A photocopy or facsimile copy of this release will be valid as an original thereof, even though said photocopy of facsimile copy does not contain an original writing of my signature.

This waiver is valid for a period of one year from the date of my signature. Should there be any question as to the validity of this release, you may contact me at the address listed on this form.

I agree to indemnify and hold harmless the person to whom this request is presented and their agents and employees, from and against all claims, damages, losses, and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

I am informed that, with limited exception, the reports, documents, and other information in written form, learned about will be subject to public disclosure under R.C. 149.43, the Ohio Open Records law.

Full Name (print): John R. Beahm

Address: 445 Marsh Dr.
Fairfield Ohio 45014

Date of Birth: 07/12/1943

SSN: 589-35-4054

Telephone: (513)-869-9548

Do not sign below until in the presence of a notary public. A township clerk can notarize this document for you.

Applicant Signature

Signed before me this _____ day of _____, 20____

Notary Public Signature