



CITY OF WARRENSBURG, MISSOURI

GENERAL APPLICATION FOR EMPLOYMENT

Position Applied for: _____ Date: _____

Name: _____ Soc. Sec. # _____
 First Middle Last

Street Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Phone # (____) _____ Evening Phone # (____) _____

Driver's License # _____ State: _____

E-mail address (optional) _____

Have you ever used another name? Yes No If yes, give name: _____

Type of employment desired: Full Time Temporary
 Part Time Permanent

Days available: Mon. Tues. Wed. Thurs.
 Fri. Sat. Sun.

Hours available: _____ Available for overtime? Yes No

Salary desired: _____

Are you:

Over the age of 18? _____ Yes No

If you are under the age of 18, and it is required,
can you furnish a work permit? _____ Yes No

A previous applicant? _____ Yes No

A previous employee? _____ Yes No

Do you qualify for work study? _____ Yes No

Legally able to work in the United States? _____ Yes No

A licensed driver with a car available for work? _____ Yes No

Do you have any relatives who work for the City? _____ Yes No

If yes, names: _____ Relationship _____

How did you learn about this job?

Advertisement in: _____ (Publication)

Employee: _____ (Name)

Employment Agency: _____ (Name)

One-Stop Center Missouri Works

Other: _____ (Specify)

Other than non alcohol-related traffic violations, have you ever been convicted of any offense? Yes No

If yes, describe in detail: _____

As used in this application, "convicted" includes any finding of guilty, plea of guilty, or plea of nolo contendere, regardless of whether or not imposition or execution of sentence is suspended.

EDUCATION

Highest level of education obtained:

- Less than high school diploma or equivalent. Grade completed: _____
- High school
- GED
- Undergraduate
- Graduate
- Technical
- Other: _____ (Specify)

* * * *

High School Attended: _____

Location: _____

* * * *

College/ University Attended: _____

Location: _____ Degree Obtained: _____

Major: _____ Minor: _____

* * * *

Graduate/Professional School Attended: _____

Location: _____ Degree Obtained: _____

Field(s) of Study: _____

* * * *

Technical/Business School Attended: _____

Location: _____

Degree/Certificate Obtained: _____

Other School Attended: _____

Location: _____

Degree/Certificate Obtained: _____

MILITARY SERVICE

Have you served in the armed services of the United States or its allies? Yes No

If yes: Branch of Service _____

Dates of Service _____

Rank at Discharge _____

Please attach a copy of your DD 214.