



City of Willow Springs

900 W. Main
P.O. Box 190
Willow Springs, MO 65793
Phone: (417) 469-2107
Fax: (417) 469-4789

Application for Employment (Please Print)

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including age, sex, color, race, creed, national origin, religious persuasion, marital status, political belief, or disability that does not prohibit performance of essential job functions.

Date: _____

I. Personal Information

Name: Last First Middle

Present Address

Permanent Address (if different than above)

Social Security Number

Telephone

E-Mail Address

Federal law prohibits the employment of unauthorized aliens. All persons hired must submit satisfactory proof of employment authorization and identity (valid driver's license, birth certificate, Green Card, etc.) within three days of being hired. Failure to submit such proof within the required time shall result in immediate employment termination. Employer participates in the E-Verify program.

Position Applied For: _____

1. Is there any information we would need about your name or use of another name for us to be able to check your work record? Please specify:

2. Do you have any relatives who are presently (or have formerly been) employed by this company?

3. How were you referred to us? _____

4. Have you ever been convicted of a felony? ___ Yes ___ No
If yes, please explain:

II. Educational History

School Name/Location / Years Completed / Degree/Diploma

Elem/Jr. High: _____

High School: _____

College: _____

Tech. Training: _____

Other: _____

III. Employment Record *(Please include all employment for the last five years.)*

1. _____
Company Name (Current or Most Recent Employer) Position Held

_____ Dates Employed: _____
Address From To

_____ Telephone Wage/Salary
Manager / Supervisor

_____ Reason For Leaving

2. _____
Company Name Position Held

_____ Dates Employed: _____
Address From To

_____ Telephone Wage/Salary
Manager / Supervisor

_____ Reason For Leaving

3. _____
 Company Name _____ Position Held _____

_____ Dates Employed: _____
 Address _____ From _____ To _____

_____ Telephone _____ Wage/Salary _____
 Manager / Supervisor _____

_____ Reason For Leaving _____

NOTE: Use a separate sheet to list additional employers, if necessary. We will contact all of the employers listed on this application unless you specifically exclude them below. Please list any employers you do not want us to contact and your reason for the exclusion:

_____ Reason _____
 (Employer's Name) _____

_____ Reason _____
 (Employer's Name) _____

IV. References (Please do not include relatives or former employers.)

1. _____
 Name _____ Years Known _____

_____ Telephone _____
 Address _____

_____ Occupation _____

2. _____
 Name _____ Years Known _____

_____ Telephone _____
 Address _____

_____ Occupation _____

3. _____
 Name _____ Years Known _____

_____ Telephone _____
 Address _____

_____ Occupation _____

V. Work Availability

1. If your application receives favorable consideration, when will you be available to begin work?

- 2. Do you have any objection to working overtime? Yes No
- 3. Can you work overtime without prior notice? Yes No
- 4. Can you work on Saturday? Yes No
- 5. Can you work on Sunday? Yes No
- 6. Can you travel if required by this position? Yes No

Do you have a driver's license? Yes No

What is your mean's of transportation to/from work? _____

Driver's license # _____ State of Issue _____ Expiration _____

Driver's license type: Operator Commercial (CDL) Chauffeur

Have you had any accidents during the past three years? Yes No

How many? _____

Have you had any moving violations in the past three years? Yes No

How many? _____

VI. Salary / Hourly Rate Requirements

If your application receives favorable consideration, what salary/hourly rate would you require?

\$ _____ per _____

VII. Agreement

It is our policy to check references as part of our hiring process. This may include contacting your former employers, as well as other business associates. We will ask a series of questions about your work experience, character, education and personality.

I also understand that (1) the Company has a drug and alcohol policy that provides for preemployment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request a Dirver's Motor Vehicle Record and a background check. Upon written request from me, the Company, will provide me with a copy of these records.

I further understand that my employment with the Company shall be probationary for a period of six months, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

After reading this policy, please indicate your agreement by signing in the space provided.

I have read and fully understand the foregoing and voluntarily consent to allow the Organization to check my references. Questions may be asked about my work experience, personality, personal habits and education.

Applicant Signature:

Date:

Received by: _____

Date: _____