

# CITY OF JOPLIN, MO

## APPLICATION FOR EMPLOYMENT



The City of Joplin is an **EQUAL OPPORTUNITY EMPLOYER** and does not discriminate based on race, color, religion, creed, marital status, national origin, sex, age, disability, genetic information, disability, sexual orientation or any other protected status.

### GENERAL INFORMATION

Position applying for:		Date:
Last Name:	First Name:	Middle Name:
Email address:		Phone:
Street Address:	City:	State: Zip Code:
Are you 18 years of age or older? ..... Yes ___ No ___ (if you are hired you may be required to submit proof of age)		
Have you ever been employed by the City of Joplin? ..... Yes ___ No ___ If yes, when?		
If employed, do you expect to be engaged in any additional business? ..... Yes ___ No ___ If yes, please give details:		
Do you have a valid driver's license, or a way to get to and from work? ..... Yes ___ No ___		
Class of License:	CDL: Y N	State License in:
List Endorsements:		
List all professional, trade, business or civic activities and offices held:		
How did you hear about this job opening? Facebook: <input type="checkbox"/> Twitter: <input type="checkbox"/> City Website: <input type="checkbox"/> Radio / TV: <input type="checkbox"/>		
Other : _____		

### EDUCATION AND TRAINING

<u>Name /Address of School</u>	<u>Years completed</u>	<u>Diploma or Degree</u>	<u>Course of Study</u>
High School /GED:			
College/University:			
Vocational/Trade:			
Other Education:			
What skills or training do you have that prepares you for the job for which you are applying?			
List all licenses you hold, including state issued, date issued and expiration date:			
<u>Type of License.</u>	<u>State issued</u>	<u>Exp. Date</u>	
List all certifications you hold:			
<u>Type of Cert.</u>	<u>Issued by</u>	<u>Exp. Date</u>	
What machines or equipment can you operate that relates to the job for which you are applying?			

**WORK HISTORY**

List names of employers in consecutive order with present or most current employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed give company name and supply business references. If additional space is needed, please attach a separate sheet. NOTE: A JOB OFFER MAY BE CONTINGENT UPON ACCEPTABLE REFERENCES FROM CURRENT AND FORMER EMPLOYERS.

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Job Duties \_\_\_\_\_

Address \_\_\_\_\_ Date worked (MO/YR) From \_\_\_\_\_ To \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Job Duties \_\_\_\_\_

Address \_\_\_\_\_ Date worked (MO/YR) From \_\_\_\_\_ To \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

Name of Employer \_\_\_\_\_ Job Title \_\_\_\_\_

Job Duties \_\_\_\_\_

Address \_\_\_\_\_ Date worked (MO/YR) From \_\_\_\_\_ To \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_ Pay: Start \$ \_\_\_\_\_ Final \$ \_\_\_\_\_

Supervisor \_\_\_\_\_ Phone Number \_\_\_\_\_

Reason for Leaving \_\_\_\_\_

**REFERENCES**

Give three References, not relatives or former employers. List Name, address and phone number.

1.

2.

3.

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and I authorize the City of Joplin to verify their accuracy and to obtain reference information on my work performance, dates of employment and pay rate. I hereby release the City of Joplin from any/all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information.

I understand that, if employed, a falsified statement of any kind or omission of facts called for on this application shall be considered sufficient basis for disciplinary action and possible termination of my employment.

I understand that if I become an employee of the City of Joplin, I must fully adhere to the policies, rules and regulations of the City of Joplin. I understand that any employment offer is conditional on completion of my employment application, interview and employment process. I understand that any employment offer may be withdrawn by the City at any time before my start date, for any reason and in the sole discretion of the City.

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_