



181 W. Harrison St. • P.O. Box 68 • Warsaw, Mo. 65355
 Phone: (660) 438-5522 Fax: (660) 438-7142

APPLICATION FOR EMPLOYMENT

WE ARE AN EQUAL OPPORTUNITY EMPLOYER
 We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or legally protected status.

POSITION APPLYING FOR: _____ **TODAY'S DATE:** ____/____/____

EMPLOYMENT DESIRED: FULL TIME PART TIME

Do you have a Resume to Submit? Y / N if yes...please staple to application

APPLICANT INFORMATION:				
Last Name:		First:		M.I.
Street Address:			Apartment/Unit #	
City:		State:		Zip:
Phone: ()		E-Mail Address:		
Date Available:		SALARY DESIRED \$		
Are you authorized to work in the U.S.? ___Yes ___No		Can you provide proof of citizenship? ___Yes ___No		
Have you ever worked for the City? ___Yes ___No		Department:		Year (s):
Are you related to any City employee(s)? ___Yes ___No		Name of Relative:		

EDUCATION:					
High School Name:		Address:		City:	State:
Did you graduate? ___Yes ___No		Year of Graduation:		Degree:	
College Name:		Address:		City:	State:
Did you graduate? ___Yes ___No		Year of Graduation:		Degree:	
Other:		Address:		City:	State:
Did you graduate? ___Yes ___No		Year of Graduation:		Degree:	

REFERENCES: Please list three references:			
Full Name:		Relationship:	
Company:		Phone: ()	
Address:		City:	State: Zip
Full Name:		Relationship:	
Company:		Phone: ()	
Address:		City:	State: Zip
Full Name:		Relationship:	
Company:		Phone: ()	
Address:		City:	State: Zip

PREVIOUS EMPLOYMENT: Please list three most recent positions, beginning with most recent.			
Company Name:		Phone: ()	
Address:		City, State, Zip:	
Job Title:	Starting Salary: \$	Ending Salary: \$	
Responsibilities:			
From: / / to / /		May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving?			
Company Name:		Phone: ()	
Address:		City, State, Zip:	
Job Title:	Starting Salary: \$	Ending Salary: \$	
Responsibilities:			
From: / / to / /		May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving?			
Company Name:		Phone: ()	
Address:		City, State, Zip:	
Job Title:	Starting Salary: \$	Ending Salary: \$	
Responsibilities:			
From: / / to / /		May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving?			

SKILL INFORMATION: (CHECK TO ALL THAT APPLY)					
CLERICAL /OFFICE SKILLS		EQUIPMENT		CONSTRUCTION	
<input type="checkbox"/>	Typing(_____ words per min)	<input type="checkbox"/>	Front End loader	<input type="checkbox"/>	Masoner/ Concrete/ Glazier
<input type="checkbox"/>	Microsoft Word	<input type="checkbox"/>	Skid Steer (Bob Cat)	<input type="checkbox"/>	Plumber
<input type="checkbox"/>	Microsoft Power Point	<input type="checkbox"/>	Zero Turn Mower	<input type="checkbox"/>	Welder
<input type="checkbox"/>	Microsoft Excel/spreadsheets	<input type="checkbox"/>	Concrete Knowledge/Forms, pouring/Setting	<input type="checkbox"/>	Electrical knowledge
<input type="checkbox"/>	Outlook	<input type="checkbox"/>	Crane Operator	<input type="checkbox"/>	Carpenter/Building/Roofing/Framing
<input type="checkbox"/>	Other: List below	<input type="checkbox"/>	Stump Grinders	<input type="checkbox"/>	Other: List below
MOTOR VEHICLES:		Chain Saws		OTHER:	
<input type="checkbox"/>	Class B CDL MO.	<input type="checkbox"/>	Operate two way radios	<input type="checkbox"/>	Cleaning tools/chemicals
<input type="checkbox"/>	Standard Transmission Vehicle	<input type="checkbox"/>	Surveyor's Transit	<input type="checkbox"/>	MSDS Knowledge
<input type="checkbox"/>	1 ½ Ton Flatbed Truck	<input type="checkbox"/>	Accurately filling out daily reports	<input type="checkbox"/>	ISO
<input type="checkbox"/>	Dump Truck	<input type="checkbox"/>	Skyscrapers/ etc.	<input type="checkbox"/>	
<input type="checkbox"/>	Other: List below	<input type="checkbox"/>	Other: List Below	<input type="checkbox"/>	
Summarize other qualifications, job related skills, specialized training, and or certificates received:					

DISCLAIMER AND SIGNATURE	
<p>I certify that my answers are true and complete to the best of my knowledge. I understand that my misrepresentation or omission of information made by me in this application or any other documentation submitted for consideration of my employment will be sufficient cause for immediate discharge regardless of length of employment. I further understand that failure to complete this application in its entirety may be cause for my application to be disqualified from consideration. Applicants may request any needed accommodation to participate in the application process.</p> <p>In consideration of my employment, I agree to conform to the policies and procedures of the City of Warsaw, Missouri. Any employment and compensation can be terminated or changed with or without cause, and with notice at any time, at the option of the City of Warsaw.</p> <p>I hereby authorize the City of Warsaw, Missouri to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation and release from liability or responsibility all persons, companies or corporations supplying such confident information. I further agree that the City of Warsaw may furnish like information to those with whom I may hereafter seek employment and agree to save the City of Warsaw free and harmless from and all liability thereof.</p>	
Signature:	Date: