



201 W. Main St. • P.O. Box 68 • Warsaw, MO 65355
 Phone: (660) 438-5522 Fax: (660) 438-7142
 welcometowarsaw.com

APPLICATION FOR LIFEGUARD

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

| APPLICANT INFORMATION: | | | |
|--|--------|---|----------|
| Last Name: | First: | M.I. | |
| Street Address: | | Apartment/Unit #: | |
| City: | State: | Zip: | |
| Phone: () | | Email Address: | |
| Date Available: | | Certified: Y N | |
| 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: | Address: |
| Did you graduate: ___Yes ___No | Year Graduated: |
| Other Name: | Address: |
| Did you graduate: ___Yes ___No | Year Graduated: |

| 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? ___Yes ___No | | | |
| Reason for leaving? | | | |

| | | | |
|---|--|---------------------|-------------------|
| 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? ___Yes ___No | | | |
| Reason for leaving? | | | |

| | | | |
|---|--|---------------------|-------------------|
| 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? ___Yes ___No | | | |
| Reason for leaving? | | | |

| | |
|--|-------|
| 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 of all person(s), 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 see employment and agree to save the City of Warsaw free and harmless from any and all liability thereof.</p> | |
| Signature: | Date: |