

# City of Parsons

## APPLICATION FOR EMPLOYMENT

WE CONSIDER APPLICANTS FOR ALL POSITIONS WITHOUT REGARD TO RACE, COLOR, RELIGION, CREED, GENDER, NATIONAL ORIGIN, AGE, DISABILITY, MARITAL OR VETERAN STATUS, OR ANY OTHER LEGALLY PROTECTED STATUS.

Position(s) Applied For \_\_\_\_\_

Date of Application \_\_\_\_\_

How Did You Learn About Us?

Advertisement

Friend

Inquiry

Employment Agency

Relative

Other

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_ Street \_\_\_\_\_ City \_\_\_\_\_ St \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ Soc. Sec. Number \_\_\_\_\_

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ AM/PM

Are you a citizen of the United States?  Yes  No

If not, do you possess an Alien Registration Card?  Yes  No

If Yes, give Alien Registration Number \_\_\_\_\_

Have you ever filed an application with us before?  Yes  No

Do any of your friends or relatives, other than spouse, work here?  Yes  No

If YES, state name, relationship, location. \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?  Yes  No

Date available for work \_\_\_\_\_ Desired Salary \_\_\_\_\_

Are you available to work: \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary

Are you currently on "Lay-Of" statues and subject to recall? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can you travel if the job requires it? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you been convicted of a felony within the last 7 years? \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, explain \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION**

School	Location	Couse of Study	Completed (y/n)
High School	_____	_____	_____
College	_____	_____	_____
Grad/Professional	_____	_____	_____
Other	_____	_____	_____

**WORK EXPERIENCE**

Start with most recent or current job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, national religion, gender origin, disabilities or other protected status.

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Work Performed \_\_\_\_\_

Phone Number \_\_\_\_\_ Wage/Salary (start) \_\_\_\_\_ (end) \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Work Performed \_\_\_\_\_

Phone Number \_\_\_\_\_ Wage/Salary (start) \_\_\_\_\_ (end) \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Work Performed \_\_\_\_\_

Phone Number \_\_\_\_\_ Wage/Salary (start) \_\_\_\_\_ (end) \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_ Work Performed \_\_\_\_\_

Phone Number \_\_\_\_\_ Wage/Salary (start) \_\_\_\_\_ (end) \_\_\_\_\_

Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_

Reason for leaving \_\_\_\_\_ May we contact? \_\_\_\_\_ Yes \_\_\_\_\_ No

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**Explain any gaps in employment.**

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**Special Skills or Training**

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**Other Qualifications**

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**Applicant's Statement**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at this time.

In the event of employment, I understand that false or misleading information given in this application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulation of the employer.

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Signature of Applicant

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Date