APPLICATION FOR EMPLOYMENT

CITY OF MARYLAND HEIGHTS

	(PLI	EASE PRINT)					
Position(s) Applied For:							
Last Name:	First 1	First Name:					
Street Address:	City:	State: Z	ip Code:				
Telephone Number(s):	Home:	Daytime:					
If you are under 18 years eligibility to work?	of age, can you provide i	required proof of your	[] YES	[] NO			
or appointed position for	es working for the City or the City? e you related and how are	-	[] YES	[] NO			
How did you learn abou If you were referred by a M	t this job listing?	please put their name.					
Are you currently employ	yed?			YES	[] NO		
May we contact your pre	sent employer?			YES	[] NO		
Are you currently on "lay	y-off" status and subject to	o recall?		YES	[] NO		
Are you prevented from Visa or Immigration state		yed in this country because of	of []	YES	[] NO		
Proof of citizenship	or immigration status will be	e required upon employment.					
On what date would you	be available for work?						
Are you available to wor	k:	[] Full-Time [] Pa	art-Time []	Гетрога	ary		
	l of a felony within the pa	st seven years? pplicant from employment but w		YES			

EDUCATION

		High So	chool		Undergraduate College/University			Graduate/Professional		
School Name and Location										
Circle highest grade completed	9	10	11	12	1	2	3	4		
Diploma/Degree										
Describe Course of Study										
Describe any specialized training, apprenticeship, skills or extra-curricular activities										
State any additional information you feel may be helpful to us in considering your application										
List professional, trade, busin You may exclude member							l origin,	age, d	isability or other protected status.	
Can you perform the essent accommodation?	ial fund	ctions	of the	e posi	tion for	whicl	h you	are a	applying with or without reas	sonable
If the position(s) you are app Missouri driver's license of the					iving of	a mo	tor vel	nicle,	you will be required to have	a valid
Do you have the appropriate	valid c	lriver's	licens	se?					[] YES [] NO	
Have you had any moving v	iolation	ıs?							[] YES [] NO	
If "Yes", please explain:										

EMPLOYMENT EXPERIENCE

Start with your present or last job.

You may exclude organizations which indicate sex, race, religion, national origin, or other protected status.

Employer		DATES EN	IPLOYED To	WORK PERFORMED
Address				
Telephone Number(s)		HOURLY RA	ATE/SALARY Final	
Job Title	Supervisor			
Reason for Leaving		_		
Employer		DATES EN From	<u> 1PLOYED</u> <u>To</u>	WORK PERFORMED
Address			_	
Telephone Number(s)		HOURLY RA	TE/SALARY Final	
Job Title	Supervisor	-		
Reason for Leaving		-		
Employer		DATES EN	1PLOYED To	WORK PERFORMED
Address			_	
Telephone Number(s)		HOURLY RA	TE/SALARY Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		DATES EN From	IPLOYED To	WORK PERFORMED
Address				
Telephone Number(s)		HOURLY R Starting	ATE/SALARY Final	
Job Title	Supervisor			
Reason for Leaving				
				•

If you need additional space, please continue on a separate sheet of paper. You may supplement this application with a resumé.

Special Skills and Qualifications:

Summarize	special	job-related	skills	and	qualifications	acquired	from	employment,	military	training,	or	other
experience:_												

REFERENCES

Please provide three (3) references, at least one professional in nature, who are not relatives and who have known you well during the past five years.

Reference 1				
First Name:	Last Name:			
Street Address:	City:	State:	Zip Code:	
Phone Number:	Em	nail:		
Years Known:	Occupation:	:		
Reference 2				
First Name:	Last Name:			
Street Address:	City:	State:	Zip Code:	
Phone Number:	Em	nail:		
Years Known:	Occupation:	:		
Reference 3				
First Name:	Last Name:			
Street Address:	City:	State:	Zip Code:	
Phone Number:	Em	nail:		
Years Known:	Occupation:	:		

APPLICANT'S STATEMENT

I understand that the city may conduct background checks into my past employment, education, criminal convictions (when job related) and any other job related inquiry necessary to arrive at an employment decision.

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment, my resume and cover letter or interviews as may be necessary to arrive at an employment decision and I release the City of Maryland Heights and its representatives or agents from any and all liability arising from such investigation. I authorize all individuals, schools, and firms named to provide any requested information and release them from all liability for providing the requesting information.

I understand that false or misleading information given in my application or interview(s) may result in a refusal to hire. In the event of employment, discovery of false or misleading information may result in discharge.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with the City of Maryland Heights is of an "at will" nature, which means that I may resign at any time, and the city may discharge me at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically authorized by the City Council. I further understand that if offered employment, the offer will be contingent upon my ability to work in the United States as determined by the requirements of US Immigration and Customs Enforcement (ICE) and passing a drug test and/or medical examination. If hired, I understand that I will be required to abide by all rules and regulations of the city.

ignature of Applicant	Date	

Applications may be mailed to:

Human Resources Manager Maryland Heights Government Center 11911 Dorsett Road Maryland Heights, MO 63043

EOE: Minority/Female/Disabled/Vet

Revised: 12/13/96; 11/29/05; 2/06/06; 1/22/09; 5/15/14; 02/02/17