

City of Wright City

636 Westwoods Road Wright City MO 63390

636 745 3101 Fax 636 745 3119 or email hr@wrightcity.org

Application of Employment

The City of Wright City is an Equal Opportunity Employer. The City does not discriminate on race, color, religion, creed, gender, national origin, age, disability, martial or veteran status, sexual orientation, or any other legally protected status.

PLEASE PRINT

Position Applied for _____ Date of Application _____

How did you learn about us?

____ Advertisement ____ Friend ____ Walk-in ____ Internet
____ Relative ____ Agency ____ Other _____

Last Name First Name Middle

Address City State Zip

Telephone Cell Phone

Driver's License # Email

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 a VISA or Immigration Status? ____ Yes ____ No

On what date would you be available for work? _____

EDUCATION

High School _____
Name/Address Major Yrs Completed Diploma/Degree

College _____
Name/Address Major Yrs Completed Diploma/Degree

College _____
Name/Address Major Yrs Completed Diploma/Degree

Other _____
(specify) Name/Address Major Yrs Completed Diploma/Degree

TRAINING AND OTHER QUALIFICATIONS

If you have received training, other than in an academic setting already listed, that is relevant to the position for which you are applying, list this information in the area below or on a separate sheet and attach it to this application. Be sure to include the type of training, subjects covered in the training, the organization that provided the training, and the length of the training.

List any additional information or special qualifications you have for the position for which you are applying. Include special machines or equipment you operate, hobbies or life experiences from which you have gained relevant skills, or other information that you want to be considered.

Employment History

Employer _____

Address _____

Telephone _____ Supervisor _____

Work Performed _____

Employer _____

Address _____

Telephone _____ Supervisor _____

Work Performed _____

Employer _____

Address _____

Telephone _____ Supervisor _____

Work Performed _____

Applicant's Statement

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 and authorize the City to perform any required reference and/or background check 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. An applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee 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 an authorized executive of this organization specifically acknowledges such change in writing.

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

By Signing this application, I hereby authorize any of the required reference and/or background checks, credit check, and CVSA Test, and investigation of statements in this application.

Signature of Applicant

Date

FOR PERSONNEL DEPARTMENT USE ONLY

Remarks _____

Interviewer _____

Date _____

Employed Yes No Job Title _____ Starting Salary _____