



City of Marysville, KS
209 N. 8th St. Marysville, KS 66508

Employment Application

Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, veteran status, marital status, disability, handicap, sexual orientation, citizenship status or any condition prescribed by state or local law.

Applicant Information

Full Name:	_____			Date:	_____
	<i>Last</i>	<i>First</i>	<i>M.I.</i>		
Address:	_____				_____
	<i>Street Address</i>				<i>Apartment/Unit #</i>
	_____				_____
	<i>City</i>		<i>State</i>	<i>ZIP Code</i>	
Phone:	_____		Email	_____	
Date Available:	_____	Social Security No.:	_____	Desired Pay:\$	_____
Position Applied for:	_____				
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, when?	_____	
Have you ever been arrested?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If Yes, explain below. Attached additional sheets to back.		
Do you have a valid driver's license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Driver's License #	_____				
Do you have a valid CDL license?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			

Education

High School:	_____		Address:	_____	
From:	_____	To:	_____	Did you graduate?	YES <input type="checkbox"/>
					NO <input type="checkbox"/>
Diploma:	_____				
College:	_____		Address:	_____	
From:	_____	To:	_____	Did you graduate?	YES <input type="checkbox"/>
					NO <input type="checkbox"/>
Degree:	_____				
Other:	_____		Address:	_____	
From:	_____	To:	_____	Did you graduate?	YES <input type="checkbox"/>
					NO <input type="checkbox"/>
Degree:	_____				

Employment

Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary:\$	_____
		Ending Salary:\$	_____
Responsibilities: _____			
From:	_____	To:	_____
		Reason for Leaving:	_____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary:\$	_____
		Ending Salary:\$	_____
Responsibilities: _____			
From:	_____	To:	_____
		Reason for Leaving:	_____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
Company:	_____	Phone:	_____
Address:	_____	Supervisor:	_____
Job Title:	_____	Starting Salary:\$	_____
		Ending Salary:\$	_____
Responsibilities: _____			
From:	_____	To:	_____
		Reason for Leaving:	_____
May we contact your previous supervisor for a reference?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	

Military Service

Branch:	_____	From:	_____	To:	_____
Rank at Discharge:	_____	Type of Discharge:	_____		
If other than honorable, explain: _____					

References

Please list three professional references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment Disclaimer and Signature

Please read and understand this statement before signing your application:

The information I have provided in this application for employment is true, correct and complete. False, incomplete or misrepresented information of any kind, will be sufficient cause for my application to be rejected or, if discovered after I am employed, cause for immediate termination of my employment.

I authorize the employer to contact and obtain information about me from previous employers, educational institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application, a related employment resume or a personal interview. To assist in the processing of my Application, I waive all rights and claims I may otherwise have against the employer or its representatives, for seeking, and using information to evaluate my employment request and all other persons, corporations or organizations who provide information for this purpose.

This application is not an employment agreement. If I accept an offer of employment I understand the employer may terminate my employment at any time, with or without cause and without prior notice, unless required by law. I understand that no one, other than an executive officer of the employer, has authority to enter into any employment agreement with terms contrary to the foregoing and then only in writing signed by such officer.

I fully understand and accept all terms and conditions in the above statement.

Signature: _____ Date: _____