

Application For Employment

CITY OF MOBERLY

-An Equal Opportunity EmployerThe city's policy is to provide equal opportunity to all qualified applicants and employees without regard to race, color, religion, sex, national origin, age, marital status, or disability.

101 West Reed Moberly, MO 65270 (660) 263-4420

Middle How long at this residence?
How long at this residence?
How long at this residence?
:Zip:
:ZIp:
Ara yay 18 yanni af uya ay aldar?
Are you 18 years of age or older?(Police Officers and Firefighters must be 21 or older
State:
No.
yment.)
Seasonal
ployed by the City?
for certain positions.)
_
training background.
City & State
DATES ATTENDED
DATES ATTENDED
DATES ATTENDED
DATES ATTENDED
DATES ATTENDED DEGREE / HOURS

WORK EXPERIENCE: Start with your present or most recent job.

1.	Employer:	Telephone:		
	Address:			
	Position:			
	Main Duties:			
	Reason for Leaving:			
	Dates Employed:	Final Pay:		
2.	Employer:	Telephone:		
	Address:			
	Position:	Supervisor:		
	Main Duties:			
	Reason for Leaving:			
	Dates Employed:	_ Final Pay:		
3.	Employer:	Telephone		
J.				
	Address:			
	Position:			
	Main Duties:			
	Reason for Leaving:			
	Dates Employed:	Final Pay:		
May	we contact the employers listed above?			
Give	name, address and telephone number of two character references who are not	related to you and are not previous employers;		
1				
2				
Summarize special skills or qualifications not covered elsewhere in this application and/or list any additional information you would like us to consider:				
DI EASE DEAD CADEEUL I VAND SICM IN INV. ADDI ICATIONS NOT SIGNED WILL NOT DE LOGISTICO				
Ιc	PLEASE READ CAREFULLY AND SIGN IN INK. APPLICATIONS NOT SIGNED WILL NOT BE ACCEPTED. I certify that answers given herein are true and complete to the best of my knowledge. I understand that any false information contained			
in	in this application is just cause for rejection of this application and, if employed, sufficient cause for dismissal.			
giv Cil cri rel org em	I agree that my possible employment is subject to satisfactory replies from previous and current employers and references and I hereby give said previous and current employers and references permission to release information to the City of Moberly. I also authorize the City of Moberly to contact my previous and present employers (except as stated above), references, and to review my driving record, criminal record, and/or other background data as it may relate to the position(s) for which I am applying or have been hired. I hereby release from liability the City of Moberly and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information. I understand that a medical examination may be required by the City, after an offer of employment is made and before I begin my employment duties, and the City may condition the employment offer on the results of the examination, provided all entering employees in the same job category are subjected to such an examination regardless of disability.			
ter no	agree to conform to the rules and regulations of the City of Moberly and understand that my employment and compensation can be erminated, with or without cause, and with or without notice, at any time, at the option of the City Manager or myself. I understand that to representative of the City has any authority to enter into any agreement for employment for any specified period of time, or to make my agreement contrary to this disclaimer.			
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Signature