



# City of Farmington

## Application for Employment

Equal opportunity employment is an important City policy. It means that applicants and employees are considered only on the basis of their qualifications and potential regardless of race, color, nation origin, ancestry, marital status, disability, age, or sexual orientation.

### PERSONAL INFORMATION

DATE OF APPLICATION: \_\_\_\_\_

#### Name:

\_\_\_\_\_  
Last First Middle Social Security No.

#### Address:

\_\_\_\_\_  
Street (Apt) City, State Zip

#### Alternate Address:

\_\_\_\_\_  
Street City, State Zip

#### Contact Information:

\_\_\_\_\_  
Home Telephone Mobile Email

Are you a United States Citizen? Yes No

If you answered no to the previous question, are you an alien authorized to work in the United States? Yes No

Are you at least 18 years of age? Yes No

If applying for police officer, are you at least 21 years of age? Yes No Not Applicable

Have you ever been convicted of a felony, served a jail or prison sentence, or been placed on probation because of committing a felony or misdemeanor (other than a traffic infraction or juvenile offense?) Yes No If yes, give details below

(A criminal record will not necessarily exclude you from employment. Factors such as age at the time of offense, rehabilitation efforts, recency and seriousness of the crime and the relationship of the crime to the position for which you have applied will also be taken into account. Give all of the facts so that an accurate decision can be made.)

Have you ever been employed by the City of Farmington? Yes No

If you answered yes to the previous question, please complete the following.

Date \_\_\_\_\_ Department \_\_\_\_\_ Position \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_

Have you ever been employed or attended school under any other names? Yes No

If yes, please list names: \_\_\_\_\_

Do you have any relatives working for the City of Farmington? Yes No

If yes, please list name and relationship: \_\_\_\_\_

**POSITION APPLIED FOR:** \_\_\_\_\_

**Available Start Date:** \_\_\_\_\_

**Are you currently employed?**      Yes      No

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**EDUCATION**

	Name and Location	Graduate? – Degree?	Major / Subjects of Study
High School			
College or University			
Specialized Training, Trade School, etc...			
Other Education			

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Please list your areas of highest proficiency, special skills or other items that may contribute to your abilities in performing the above mentioned position.

**PREVIOUS EXPERIENCE**

Please list beginning from most recent

Dates Employed	Company Name	Address	Role/Title

Salary	Supervisor's Name and Telephone Number	May we contact this employer?
		Yes      No

**Job notes, tasks performed and reason for leaving:**

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Dates Employed	Company Name	Address	Role/Title

Salary	Supervisor's Name and Telephone Number	May we contact this employer?
		Yes No

Job notes, tasks performed and reason for leaving:

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Dates Employed	Company Name	Address	Role/Title

Salary	Supervisor's Name and Telephone Number	May we contact this employer?
		Yes No

Job notes, tasks performed and reason for leaving:

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## **MILITARY SERVICE**

**Are you a veteran of the U.S. Armed Services?**      Yes      No

If yes, list the branch and type of discharge status: \_\_\_\_\_

Dates of Service (From/To): \_\_\_\_\_ Rank at Discharge: \_\_\_\_\_

## **PERSONAL REFERENCES**

Former employers and relatives cannot be used as personal references

<b>Name and Occupation</b>	<b>Address</b>	<b>Phone Number</b>

Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided.

1. I certify that all the information provided by me in connection with my application, whether on this document, is true and complete, and I understand that any misstatement, falsification, or omission of information may be grounds for refusal to hire or, if hired, termination.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the United States.
3. I authorize any of the persons or organizations referenced in this application to give you any and all information concerning my previous employment, education, or any other information they might have, personal or otherwise, with regard to any of the subjects covered by this application, and I release all such parties from all liability from any damages which may result from furnishing such information to you.
4. I understand that disclosure of my Social Security Number (SSN) is optional. The organization which I am applying may use the SSN for administrative tracking purposes and for identification of individuals. This is in accordance with the Federal Law U.S.C 552a Section 7 (b).
5. I understand that if hired, a pre-employment drug screening and background check will be required.
6. I understand that Missouri law provides that employees of municipalities are employed "at will", and employment lasts only as long as the employer (City) desires. No reason is required to terminate the employment relationship.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**City of Farmington  
Attn: Human Resources  
110 West Columbia Street  
Farmington, MO 63641**