

EMPLOYMENT HISTORY

Please give the following information, beginning with your **current or most recent** employment.

Employer: _____ Dates of employment: _____
Address: _____ Job Title: _____
Telephone: _____ Supervisor: _____
Hourly Rate of Pay: Starting _____ Final _____
Work Performed: _____
Reason for Leaving: _____ May we call for reference? Yes ____ No ____

Employer: _____ Dates of employment: _____
Address: _____ Job Title: _____
Telephone: _____ Supervisor: _____
Hourly Rate of Pay: Starting _____ Final _____
Work Performed: _____
Reason for Leaving: _____ May we call for reference? Yes ____ No ____

Employer: _____ Dates of employment: _____
Address: _____ Job Title: _____
Telephone: _____ Supervisor: _____
Hourly Rate of Pay: Starting _____ Final _____
Work Performed: _____
Reason for Leaving: _____ May we call for reference? Yes ____ No ____

Employer: _____ Dates of employment: _____
Address: _____ Job Title: _____
Telephone: _____ Supervisor: _____
Hourly Rate of Pay: Starting _____ Final _____
Work Performed: _____
Reason for Leaving: _____ May we call for reference? Yes ____ No ____

EDUCATION

High School:

How many years did you complete? 1 2 3 4 Did you graduate? Yes ___ No ___

Name and Location of High School _____

Have you received a High School Equivalence Certificate (G.E.D.)? Yes ___ No ___

Junior College, College and University (undergraduate, graduate, professional):

| School & Location | Attended From/To (month & year) | Total Semester Hours | Major (& minor if applicable) | Degree & Date Received |
|-------------------|------------------------------------|----------------------|-------------------------------|------------------------|
| | | | | |
| | | | | |
| | | | | |

Other training (business, trade, service schools, internships, etc.)

| School & Location | Attended From/To (month & year) | Full-Time or Part-Time | Subjects & Hours Completed | Certificate & Date Received |
|-------------------|------------------------------------|------------------------|----------------------------|-----------------------------|
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REFERENCES

Please give the following for three persons not related to you, whom you have known at least one year.

| Name | Address | Phone | Occupation | Years Known |
|------|---------|-------|------------|-------------|
| | | | | |
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AUTHORIZATION FOR RELEASE: I hereby authorize the City of Palmyra to make such investigations and inquiries as to my character, employment record, education records including transcripts, and conviction records as may be deemed necessary in arriving at an employment decision. I hereby release employers, schools, law enforcement agencies and persons from all liability for any damage whatsoever that may ensue from furnishing the same to the City of Palmyra.

CERTIFICATE OF APPLICANT: (Read carefully before signing.) I certify that all answers and statements herein contained are true to the best of my knowledge and belief. I understand that any misstatement or omission of material fact will subject me to disqualification or dismissal. I approve the above authorization for release.

Before signing please check to insure that all questions have been answered in a thorough manner. An incomplete application may result in the application being rejected or delayed, which could result in a lost job opportunity.

SIGNATURE: _____ DATE: _____

EMPLOYMENT INFORMATION WAIVER

I voluntarily consent to a thorough investigation of my past employment and activities. I give the City of Palmyra the right to make checks on my background and release from all liability or responsibility all persons, companies or corporations supplying such information.

Applicant's Name (Printed) _____

Date of Birth _____ Social Security Number _____

Driver's License Number & State of Issuance _____

Applicant's Signature _____ Date _____

FOR OFFICE USE ONLY:

Following are the findings from a Police Department record check:

Name of Police Department Representative (Printed) _____

Signature of Police Department Representative _____

Date _____

FOR POLICE APPLICANTS ONLY:

I do hereby authorize all Law Enforcement Agencies, the Veterans Administration, U.S. Army, U.S. Navy, U.S. Air Force, all Military Agencies, all Federal, State or Local Government Agencies, State and Federal Tax Bureaus, Credit Bureaus, Schools and Universities to furnish the City of Palmyra, Department of Police any and all available information regarding me in order that they may determine my suitability for police work.

SIGNATURE: _____ DATE: _____

CONVICTION RECORD RELEASE

The information requested is for identification purposes and is required by police authorities to properly identify an applicant. All applicants must supply this information. Having a conviction record does not necessarily bar you from employment. Each case is considered individually with reference to the position for which you are applying. Applicants selected for positions which involve driving a city vehicle will have their driving records checked. Possession of a poor driving record may result in not being hired or termination of employment.

Name: _____
Last First Middle

List other names you have used, gone to school under and/or worked under (including maiden):

Date of Birth: ____/____/____ Social Security Number: _____
Month Day Year

Place of Birth: _____
City State

Present Address: _____
Number Street City State Zip

Previous Missouri Address: _____
Number Street City State Zip

Previous Address Outside Missouri: _____
Number Street City State Zip

I hereby certify the above information is correct and authorize the release of my entire record to the City of Palmyra Department of Police.

SIGNATURE (must be in ink):

DATE: