

Marshall Parks & Recreation Department

Application for Employment

NOTICE TO APPLICANTS AND EMPLOYEES: Screening tests for alcohol and illegal drug use may be required before hiring and during your employment here.

Name: _____

Last

First

Middle

Today's Date

Address: _____

Street

City

State

Zip

Social Security Number: _____

Sex: _____

Marital Status: _____

Telephone Number: _____ Cell Phone Number: _____ Email: _____

Have you ever been convicted of a felon? _____ If yes, give date & details of charges.

List Education: High School _____ Grade Completed _____
College _____ Degree Earned _____
Trade School _____ Certification _____

Employment History:

Past Employer	Phone Number	Salary
1. _____	_____	_____
2. _____	_____	_____

References other than employers:

Name	Phone Number	Relationship
1. _____	_____	_____
2. _____	_____	_____

What are you applying for; please preference your positions with 1 (most wanted) - 5 (least wanted).

Front Desk _____ Concession (Golf/Pool) _____ Maintenance _____ Day Camp Counselor _____

Umpire _____

List Personal qualities which would qualify you for the job:

Preferred Schedule:	MON	TUES	WED	THURS	FRI	SAT	SUN
AM							
PM							

How many hours a week are you willing to work? _____ Date Available for Employment _____

List All Certifications that relevant to position that you are applying for:

Certification	Date Received	Expiration Date
1. _____		
2. _____		
3. _____		
4. _____		
5. _____		

* Please attach a copy of all certifications

CDL Classification: Yes _____ No _____ If yes: A B or C

Other Kinds of Work You Can Do: _____

I have answered all the questions truthfully and understand it is grounds for termination if any portion is found to be false.

Signature _____

Date _____

Authorization for Background Check

I understand that I am applying for seasonal or temporary work as an employee of the City of Marshall, Missouri Parks and Recreation Department (the "Park"). I understand that a background check will be conducted before I am employed, or soon thereafter, and I agree to cooperate in that background check. I, the undersigned, give permission to the Park to conduct a background check. My signature authorizes the Park to review my previous employment (except as listed below), driving, and criminal records, and/or other background data as it may relate to the position(s) for which I am applying or have been hired.

IF YOU ARE UNDER THE AGE OF 18, YOUR PARENT OR GUARDIAN MUST ALSO SIGN THIS FORM. PLEASE BE SURE TO LET US KNOW IF YOU DO NOT UNDERSTAND ANY PART OF THIS FORM.

Printed Name of Applicant: _____

Printed Name of Parent/Guardian: _____
 (If Applicant under 18)

Applicant Signature: _____

Parent/Guardian Signature: _____

Date: _____