

Application for Employment



City of Saint Louis
300 N. Mill St.
Saint Louis, MI 48880-1529

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify a representative of the Human Resources Department.

Name _____ Social Security # _____
Last First Middle

Address _____
Street City State Zip Code

Telephone # (____) _____ Mobile/Beeper/Other # (____) _____ E-mail address _____

Position(s) applied for _____ Date of application ____/____/____

Referral Source (Please check the appropriate category and name the source.)

- | | |
|------------------------------|---|
| ____ Walk-in _____ | ____ School _____ |
| ____ Employee _____ | ____ Job Fair _____ |
| ____ Advertisement _____ | ____ Staffing Agency _____ |
| ____ Company's Website _____ | ____ Government Employment Agency _____ |
| ____ Other Internet _____ | ____ Other _____ |

If necessary, best time to call you at home is _____ AM
_____ PM

May we contact you at work? _____
If yes, work number and best time to call: _____ AM
_____ PM

If you are under 18 and it is required, can you furnish a work permit? _____ Yes _____ No
If no, please explain: _____

Have you submitted an application here before? If yes, give dates and positions: _____ Yes _____ No

Have you ever been employed here before? _____ Yes _____ No
If yes, give dates From _____ To _____

Are you legally eligible for employment in this country? _____ Yes _____ No

Date available for work..... ____/____/____

What is your desired salary range? \$ _____

Type of employment desired: _____ Full-Time _____ Part-Time
_____ Temporary _____ Seasonal _____ Educational Co-Op

Will you relocate if job requires it? _____ Yes _____ No

Will you travel if job requires it? _____ Yes _____ No

If they have been explained to you, are you able to meet the attendance requirements of the position _____ Yes _____ No

Will you work overtime if required? _____ Yes _____ No
If no, please explain _____

Are you able to perform the essential functions of the job for which you are applying (with or without reasonable accommodation?)
This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability, particular accommodation, or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.
_____ Yes _____ No
_____ Need more information about the job's "essential functions" to respond

Driver's license number required if driving may be required in the job for which you are applying _____ State _____

Answering "yes" to either of the following questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Have you ever pleaded "guilty" or "no contest" to, or been convicted of a crime? _____ Yes _____ No
If yes, please provide date(s) and details _____

EMPLOYMENT HISTORY

Starting with the most recent employer, provide the following information

Employer	Telephone # ()		Month	Year	to	Month	Year
Street address	City	State	Dates employed / / to / /				
Starting job title/final job title		Commissions/Bonus/other		\$ per			
Immediate supervisor and title (for most recent position held)		May we contact for reference?		Compensation (Final)			
Why did you leave?		Commission/Bonus/Other		\$			
Summarize the type of work performed and job responsibilities							
Employer	Telephone # ()		Month	Year	to	Month	Year
Street address	City	State	Dates employed / / to / /				
Starting job title/final job title		Commissions/Bonus/other		\$ per			
Immediate supervisor and title (for most recent position held)		May we contact for reference?		Compensation (Final)			
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Immediate supervisor and title (for most recent position held)		May we contact for reference?		Compensation (Final)			
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Street address	City	State	Dates employed / / to / /				
Starting job title/final job title		Commissions/Bonus/other		\$ per			
Immediate supervisor and title (for most recent position held)		May we contact for reference?		Compensation (Final)			
Why did you leave?		Commission/Bonus/Other		\$			
Summarize the type of work performed and job responsibilities							

Explain any gap in your employment, other than those due to personal illness, injury or disability. _____

If not addressed on previous page, have you ever been fired or asked to resign from a job? ___ Yes ___ No
 If yes, please explain _____

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying

Computer Skills (check appropriate skills. Include software titles and years of experience)

___ Word Processing _____ Years _____ ___ E-mail _____ Years _____
 ___ Spreadsheet _____ Years _____ ___ Internet _____ Years _____
 ___ Presentation _____ Years _____ ___ Other _____ Years _____

Educational Background

Starting with your most recent school attended, provide the following information.

School (include City and State)	Years Completed	Completed	GPA Class Rank	Major/Minor
		___ Diploma _____ ___ Degree _____ ___ Certification _____ ___ Other _____		
		___ Diploma _____ ___ Degree _____ ___ Certification _____ ___ Other _____		
		___ Diploma _____ ___ Degree _____ ___ Certification _____ ___ Other _____		
		___ Diploma _____ ___ Degree _____ ___ Certification _____ ___ Other _____		

References

List names and telephone number of three business/work references who are not related to you and are not previous supervisors.
 If not applicable, list three school or personal references who are not related to you.

Name	Title	Relationship to You	Telephone	Number of Years Known
			()	
			()	
			()	

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarity protected status.

Organization	Offices Held

List special accomplishments, publications, awards, etc.

Exclude information that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarity protected status.

In your current or a prior job, have you ever written instructions or directions to be followed by employees or customers? Yes No Not Applicable

If yes, please explain: _____

Is there any other job-related information you want us to know about you? _____

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with this employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume' or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at anytime, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

This Company does not tolerate unlawful discrimination in its employment practices. No questions on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge form the employer's service, whenever it is discovered.

I also understand that, should I bring a claim against the City of St. Louis, arising out of my application for employment, employment with, or departure from employment with the City, I agree to do so within 180 days of the event giving rise to the claim, or the time limits provided in any statute for such claim, whichever is shorter, or be forever barred from bringing such a claim. I expressly waive any limitation period which is longer than 180 days. The only exception to this limitation period is for claims which are require to first be raised with the Equal Employment Opportunity Commission, before any civil action can be filed. For such claims, I agree to bring any civil act within 30 days of the issuance of a right to sue letter by the EEOC.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant _____ Date _____