City of Midland City

Employment Application

Full Name: _____ Date:_____

Last _First_ _M.I._

Address: _____

Street Address _Apartment/Unit #_

_____

City _State_ _ZIP Code_

Phone: _____ Email_____

Date Available: _____ Social Security No.:_____ Desired Salary:$_____

Position Applied for: _____

	YES	NO		YES	NO
Are you a citizen of the United States?	☐	☐	If no, are you authorized to work in the U.S.?	☐	☐
Have you ever worked for this company?	☐	☐	If yes, when?_____		
Have you ever been convicted of a felony?	☐	☐			

If yes, explain: _____

High School: _____ Address:_____

From: _____ To:_____ Did you graduate? YES ☐ NO ☐ Diploma:_____

College: _____ Address:_____

From: _____ To:_____ Did you graduate? YES ☐ NO ☐ Degree:_____

Other: _____ Address:

From: _____ To:_____ Did you graduate? YES ☐ NO ☐ Degree:_____

Please list three professional references.

Full Name: _____ Relationship:_____

Company: _____ Phone:_____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:**$** Ending Salary:**$**

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference?
YES ☐   NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:**$**_____ Ending Salary:**$**_____

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference?
YES ☐   NO ☐

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:**$**_____ Ending Salary:**$**_____

Responsibilities: _____

From: _____ To:_____ Reason for Leaving:_____

May we contact your previous supervisor for a reference?
YES ☐   NO ☐

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Employees are required to submit to Drug and Alcohol testing in accordance with the City of Midland City's Drug and Alcohol Testing policy, which includes pre-employment and random tests for the duration of employment in all positions.

Signature: _____ Date: _____