City of Osceola, Missouri

210 Olive St. · P.O. Box 561, Osceola, MO 64776 · Phone (417) 646-8421 · Fax (417) 646-2015

Job Application

Please print clearly. Bring or mail the finished form to City Hall: 210 Olive St., or P.O. Box 561, Osceola, MO 64776. You can also fill it out online on the City's website, under **Forms**.

The City of Osceola is an Equal Opportunity Employer. Fill out as much as you can. Fields marked required must be filled in.

This form does not ask for your Social Security number. If you are offered a job, City Hall will collect it in person.

ABOUT YOU

Position you are applying for

First name | Middle initial | Last name

Street address

Apartment or unit number | City | State

ZIP code | Phone

Email address | Date you can start

Desired pay

WORK ELIGIBILITY AND BACKGROUND

Are you a citizen of the United States?

☐ Yes ☐ No

If not, are you authorized to work in the U.S.?

☐ Yes ☐ No

Have you worked for the City of Osceola before?

☐ Yes ☐ No

If yes, when?

Have you ever been convicted of a felony?

☐ Yes ☐ No

If yes, please explain

HIGH SCHOOL

School name and town

Years attended (from and to)

Did you graduate?

☐ Yes ☐ No

Degree or diploma

COLLEGE

School name and town

Years attended (from and to)

Did you graduate?

☐ Yes ☐ No

Degree or diploma

OTHER SCHOOLING OR TRAINING

School name and town

Years attended (from and to)

Did you graduate?

☐ Yes ☐ No

Degree or diploma

REFERENCE 1

Please list three professional references.

Full name

Company and how you know them

Address

Phone

REFERENCE 2

Full name

Company and how you know them

Address

Phone

REFERENCE 3

Full name

Company and how you know them

Address

Phone

MOST RECENT JOB

Company

Company address

Company phone | Supervisor | Your job title

Dates worked (from and to) | Starting pay | Ending pay

Responsibilities

Reason for leaving

May we contact this supervisor for a reference?

☐ Yes ☐ No

JOB BEFORE THAT (2)

Company

Company address

Company phone | Supervisor | Your job title

Dates worked (from and to) | Starting pay | Ending pay

Responsibilities

Reason for leaving

May we contact this supervisor for a reference?

☐ Yes ☐ No

JOB BEFORE THAT (3)

Company

Company address

Company phone | Supervisor | Your job title

Dates worked (from and to) | Starting pay | Ending pay

Responsibilities

Reason for leaving

May we contact this supervisor for a reference?

☐ Yes ☐ No

MILITARY SERVICE (IF ANY)

Branch

Dates of service (from and to)

Rank at discharge

Type of discharge

If other than honorable, please explain

AGREEMENT

☐ 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.

SIGNATURE

By signing, I confirm the answers above are mine and are true and complete.

Signature of applicant

Printed name

Date

FOR CITY HALL USE

Received by (City staff)

Fee paid and receipt number, if any

Date

Notes