



2350 NE Independence Ave.
 Lee's Summit, MO 64064
 816.525.4220 • Fax 816.524.8235

Application for Employment

PLEASE PRINT

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.

Position(s) applying for: _____ Date of application: ____/____/____

Name: _____ Social Security #: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone # (____) _____ Other Phone # (____) _____ Email _____

Have you ever been employed here before? YES / NO If yes, please give dates and positions. _____

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 / Education Co-Op

What shift are you applying for? First Second Third

Have you ever pled 'guilty' or 'no contest' to, or been convicted of a crime? YES / NO

If yes, please provide dates and details. _____

Answering yes to these questions does not constitute and 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.

Drivers license number (if driving is an essential job function) _____ State _____

Employment History

Provide the information of your past three (3) employers, assignments or volunteer activities, starting with the most recent.

From	To	Employer	Phone ()
Starting Job Title/Final Job Title		Address	
Immediate Supervisor/Title		Summarize job duties/responsibilities	
May We Contact? Yes / No / Later			
Reason For Leaving		Hourly Rate/Salary	Start \$ per Final \$ per
From	To	Employer	Phone ()
Starting Job Title/Final Job Title		Address	
Immediate Supervisor/Title		Summarize job duties/responsibilities	
May We Contact? Yes / No / Later			
Reason For Leaving		Hourly Rate/Salary	Start \$ per Final \$ per
From	To	Employer	Phone ()
Starting Job Title/Final Job Title		Address	
Immediate Supervisor/Title		Summarize job duties/responsibilities	
May We Contact? Yes / No / Later			
Reason For Leaving		Hourly Rate/Salary	Start \$ per Final \$ per

Skills and Qualifications

Summarize any training, skills, licenses and/or certifications that may qualify you as being able to perform job related functions in the position for which you are applying.

Educational Background

	Name and Location	Number of Years Completed	Did You Graduate?	Course of Study
High School				
College				
Other				

References - non related, known at least one year

	Name	Telephone	Number of Years Known
1.			
2.			
3.			

Applicant Statement

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

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) cancel further consideration of this application or (ii) immediately discharge me from the employer's service, whenever it is discovered.

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, 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 such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on the application is used for the purpose of limiting or excusing any applicant from consideration for employment on a 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 may be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and 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 authority to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT

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

Signature of Applicant: _____ Date: ____ / ____ / ____

OFFICE USE ONLY - Please do not write below this line

Date of Interview: ____ / ____ / ____

Remarks: _____

