**APPLICATION FOR EMPLOYMENT**
**City of Hannibal**
**320 Broadway**
**Hannibal, MO 63401**
**Phone 573 221-0154**
**Fax 573 221-0707**

HANNIBAL PARKS & RECREATION DEPARTMENT

**Position applied for** _____ **Date of Application** _____

**Name:** _____ **Home Phone** _____
Please print

_____ **Work Phone** _____
**Street**

_____ **Cell Phone** _____
**City** **State** **Zip**

**e-mail** _____

**Are you willing to work evenings or week-ends if required?** _____

**If hired, first date you would be available to work?** _____

**Have you ever been convicted of a felony or received a suspended imposition of sentence for a felony?**
_____

**If so, explain circumstances:** _____

_____

**Can you operate an automobile?** _____ **Driver's License #** _____ **State** _____

**Do you have a CDL License?** _____

**Have you had any arrests, suspensions or revocations on your driving record?** _____

| **EDUCATION** | **NAME AND LOCATION OF SCHOOL** | **MAJOR** | **DIPLOMA/DEGREE** |
|---|---|---|---|
| **High School** | | | |
| **College/University** | | | |
| **College/University** | | | |
| **College/University** | | | |
| **Other Training** | | | |
| **Other Training** | | | |

If education or training was received under a different last name, please give name that appears on your school or training records.

_____

**Please list your employment history, beginning with your present or most recent employer.**

**Employer Name** _____

**Address** _____

**Date Started** _____ **Date Left** _____ **Reason for Leaving** _____

**Describe Duties** _____

_____

_____

**May we contact this employer for a reference? Yes** _____ **No** _____

**Employer Name** _____

**Address** _____

**Date Started** _____ **Date Left** _____ **Reason for Leaving** _____

**Describe Duties** _____

_____

_____

**May we contact this employer for a reference? Yes** _____ **No** _____

**Employer Name** _____

**Address** _____

**Date Started** _____ **Date Left** _____ **Reason for Leaving** _____

**Describe Duties** _____

_____

_____

**May we contact this employer for a reference? Yes** _____ **No** _____

**Employer Name** _____

**Address** _____

**Date Started** _____ **Date Left** _____ **Reason for Leaving** _____

**Describe** Duties _____

_____

_____

**May we contact this employer for a reference? Yes** _____ **No** _____

**Please list job knowledge or abilities that will be useful for the position applied for:**

_____

_____

_____

_____

**Please list professional or character references (no relatives)**

_____ _____
Name Name

_____ _____
Address Address

_____ _____
City State Zip City State Zip

_____ _____
Name Name

_____ _____
Address Address

_____ _____
City State Zip City State Zip

**Additional comments:** _____

_____

_____

_____

**Applicants are encouraged to submit a resume, work samples, and academic records if available.**

**It is the policy of the City of Hannibal to provide equal employment opportunities without regard to race, color, religion, sex, national origin, age, disability, marital status, veteran status, sexual orientation, genetic information or any other protected characteristic under applicable law.**

**I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that by signing this application, I will allow a check on background and references as indicated above. I also understand that if I am employed, any false statements on this application may result in dismissal.**

**I authorize the City to make an investigation of any of the facts set forth in this application.**

_____ _____
**Signature** **Date**