

APPLICATION FOR EMPLOYMENT McDonald County 9-1-1 Center

Please print or type: Use black ink

Date _____

Position Applying For _____

PERSONAL INFORMATION			
Name:			SSN _____
	(LAST)	(FIRST)	(Middle)
List any Alias Names Use _____ (i.e. maiden names, nicknames, etc.....)			
Address _____			
	(STREET)	(CITY)	(STATE) (ZIP)
County of Residence: _____		Place of Birth _____	
Home Phone Number _____		Other Phone Number(s) _____	
Date of Birth _____	Are you 18 Years or Older		YES NO
Are you willing to work (check all that apply) _____ days _____ evenings _____ nights _____ weekends _____ holidays _____ split shifts			
Are you interest in (circle one):		Full Time	Part time
Date available for employment: _____			

EDUCATION		
Are you a high school graduate (circle one)	YES	NO
If NO: Do you have a GED:	YES	NO
School	Name and Location (city) of School Attended	Completed
High School		9 10 11 12
Business/ Technical		1 2 3 4
College		1 2 3 4
Graduate School		1 2 3 4

EMPLOYERS

List Below the Last Four (4) employers, starting with the last one first

Date Month/Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From _____ To _____				
From _____ To _____				
From _____ To _____				
From _____ To _____				

Are you presently employed?

YES

NO

If YES, may we contact your employer

YES

NO

If NO, please explain why _____

PERSONAL REFERENCES

Please list three (3) personal references. These are people that have know you for at least 4 years, which are not form employers, relatives, or people who you are living with:

Name _____ Address _____

Occupation _____ Home Phone _____ Work Phone _____

Name _____ Address _____

Occupation _____ Home Phone _____ Work Phone _____

Name _____ Address _____

Occupation _____ Home Phone _____ Work Phone _____

Date _____ Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed by: _____ **Date:** _____

Remarks: _____

Neatness: _____

Hired **YES** **NO** **Position** _____

Salary/Wage _____ **Date Reporting to Work** _____