Application for Employment

Notice to Applicants:

Complete application carefully and completely. Application information will aid in evaluating your qualifications. All offers of employment are conditional upon successfully passing all appropriate examinations and lab test possibly to include drug screening. Physical and/or other examinations are used to determine whether applicants are qualified to perform the essential functions of the position with or without reasonable accommodations. The City of Mission will consider any requests for accommodations of physical or mental disabilities at any time before or after employment begins.

Incomplete applications will not be accepted.

For office use only:

Date received:_____

Initials:_____

Applicant #:_____

The City of Mission Employment Application

This application must be completed in full, even if a resume is attached.

Thank you for your interest in employment with the City of Mission, Kansas. The City of Mission is an Equal Opportunity Employer. We consider all applicants on the basis of qualifications and job-related requirements and criteria, without regard to race, color, creed, religion, sex, national origin, age, marital status, veteran status, disability, sexual orientation, and any other legally protected status.

Name (Last, First, M.I.)_____

Any other names by which you are known:_____

Street Address_____City_____State_____Zip_____

Telephone: Home_____ Cell_____ Email _____

Desired Position(s) – give exact title(s): 1st Choice_____

2nd Choice_____3rd Choice_____

Employment desired: ☐ full-time ☐ part-time ☐ temporary/seasonal

Date available to begin work:_____

How did you learn about this position? ☐ Advertisement – name of publication:_____

☐ Friend ☐ City Employee – provide name_____ ☐ Walk-in ☐ Other

List any current relatives employed by the City of Mission or serving in an official capacity:_____

Please review the job description for the position(s) you are applying for before answering: Are you able to perform the essential function of each of the positions you listed: ☐ Yes ☐ No If "No", please explain by position title:

_____

_____

If you are under 18 years of age, can you provide required work authorization? ☐ Yes ☐ No

Are you legally eligible to work in the United States and able to provide required documentation upon employment?

☐ Yes ☐ No

Have you ever had any job-related training in the United States military? ☐ Yes ☐ No

If "Yes", please describe training, give dates, branch of military and any other information you feel would be helpful:

_____

_____

_____

_____

Have you ever been employed by the City of Mission before? ☐ Yes ☐ No If "Yes", complete the following:

Dates Employed: _____ Position(s) Held:_____ Reason for Leaving:_____

EDUCATION

	Name and Location of School	Course of Study	# of Years Completed	Diploma, Certificate or Degree Received or Credit Hours Completed
High School				
College or University				
Vocational or Trade School				
Graduate School				

WORK HISTORY

Start with your present or most recent employment and provide ALL information requested.

Name of Employer:		Phone number:	
Complete Address: (include street, city, state and zip)		Supervisor's name, title, and phone number:	
From: Month/Day/Year	To: Month/Day/Year	Starting Salary:	Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each: _____ _____ _____			
Name of Employer:		Phone number:	
Complete Address: (include street, city, state and zip)		Supervisor's name, title, and phone number:	
From: Month/Day/Year	To: Month/Day/Year	Starting Salary:	Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each: _____ _____ _____			

WORK HISTORY

Continued

Name of Employer:		Phone number:	
Complete Address: (include street, city, state and zip)		Supervisor's name, title, and phone number:	
From: Month/Day/Year	To: Month/Day/Year	Starting Salary:	Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each: _____ _____ _____			
Name of Employer:		Phone number:	
Complete Address: (include street, city, state and zip)		Supervisor's name, title, and phone number:	
From: Month/Day/Year	To: Month/Day/Year	Starting Salary:	Ending Salary:
Give title(s) of position(s) held and describe the duties and responsibilities of each: _____ _____ _____			

Do you authorize inquiry about you from your present employer? ☐ Yes ☐ No If "No", please explain:_____

_____

What is your desired salary range or minimum salary requirements?_____

List any special certifications, courses, training, seminars or military experience that would enable you to perform the duties of the position for which you are applying:_____

_____

_____

Have you ever been convicted of any criminal offenses other than minor traffic violations? ☐ Yes ☐ No

If "Yes", please explain:_____

_____

_____

(Disclosure of a criminal record will not necessarily disqualify you from employment consideration. Each conviction will be evaluated on its own merit with respect to time, circumstances, and seriousness, in relation to the job for which you are applying. However, failure to disclose such information may result in disqualifying you from employment consideration or termination of employment.)

Applicants Acknowledgement and Agreement

Any questions regarding this Acknowledgement and Agreement or the Employment Application should be directed to the Assistant City Administrator BEFORE signing. This acceptance does not imply or guarantee that the applicant will be employed by the City of Mission, however, every completed Application will be given consideration for employment.

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this Employment Application, including previous employment, as may be necessary in arriving at an employment decision. I hereby release the City of Mission from any and all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I also release from all liability anyone supplying such information and release the City of Mission from all liability that might result from making an investigation.

I understand that the falsification, misrepresentation or omission of facts on this Employment Application, or any other accompanying or required document, will be cause for denial of employment or immediate termination of employment, regardless of when or how discovered. I will provide all documentation as proof of educational, training or certification requirements.

I hereby understand and acknowledge that unless otherwise defined by applicable law, any employment relationship with the City of Mission is of an *"at-will"* nature, which means that the employee may resign at any time and the City of Mission may terminate the employee at any time, with or without cause or notice. I understand that any employment offered is for an indefinite duration. It is further understood that this *"at-will"* employment relationship may not be changed by any written documentation or by conduct unless such change is specifically acknowledged in writing by the Mayor, with the approval of the City Council.

If employed, I agree to submit to a drug and alcohol test at any time deemed appropriate by the City and as permitted by applicable law. I consent to such tests, and I request that the results of such tests be disclosed to the City, which the City shall keep confidential. I understand that my employment or continued employment, to the extent permitted by applicable law, is contingent upon a negative drug and/or alcohol test.

I understand that should an employment offer be extended to me and accepted by me, that I will fully adhere to the policies, rules and regulations of employment of the City of Mission. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I further understand that no representation, whether oral or written by any representative or agent of the City of Mission, at any time, can constitute a contract of employment. I understand that my employment will be contingent upon signing the Acknowledgement Page of the Personnel Policy and Guidelines Manual.

I understand that the City of Mission and its executives shall have the maximum discretion permitted by law to administer, interpret, modify, discontinue, enhance or otherwise change all policies, procedures, benefits or other terms or conditions of employment. NO EMPLOYMENT WITH THE CITY OF MISSION IS "PERMANENT". Therefore, no representative or agent of the City of Mission has the authority to enter into any agreement of employment for any specified period of time or to make any change in any policy, procedure, benefit or other term or condition of employment, or to make any agreement contrary to the foregoing, other than in a document signed by the Mayor, with the approval of City Council.

If employed, I agree to engage in no outside activity which would involve a material conflict of interest with, or which could reflect adversely on the City of Mission. I understand this decision is to rest with the City of Mission.

If employed, I agree to hold in strictest confidence any information concerning the City of Mission, its citizens, employees and agents.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied by me on this Employment Application.

_____ _____

Signature of Applicant Date

City of Mission

Candidate Reference Check Form

Candidate – Please complete the top 5 lines only

REFERENCES MAY NOT BE RELATIVES

Date:	
Candidate's Name:	
Reference Name:	**Phone #:**
Reference's Current Position:	
Reference's Past/Present Relationship with Candidate:	
Everything below this line to be completed by a City of Mission staff member.	
Strength areas of Candidate:	
Improvement areas for Candidate:	
Candidates success in the following areas: (Please rank 1-5; 1 – low/5 – high) **_____Accuracy and detail orientation** **_____Technical knowledge** **_____Work Ethic**	**_____Follow-through** **_____Achieving goals** **_____Attendance**
Would you hire this candidate to work for/with you again?	
How is this candidate perceived by subordinates/peers/managers?	
What other aspects of the candidate's work record should we understand to best manage this candidate?	

City of Mission

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