

# APPLICATION FOR EMPLOYMENT

EXCELSIOR SPRINGS POLICE DEPARTMENT  
301 SOUTH MAIN  
EXCELSIOR SPRINGS, MISSOURI 64024

NOTE: FILL IN BOTH SIDES OF THE APPLICATION CAREFULLY AND COMPLETELY. THE INFORMATION WILL BE USED TO DETERMINE YOUR ELIGIBILITY. PLEASE ATTACH ADDITIONAL PAPER IF NECESSARY. YOU MAY ALSO ATTACH A RESUME.

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1. POSITION APPLYING FOR: \_\_\_\_\_
  2. PRINT NAME: \_\_\_\_\_  
(LAST) (FIRST) (MIDDLE)
  3. ADDRESS: \_\_\_\_\_  
(STREET) (CITY) (STATE) (ZIP)
  4. PHONE NUMBER: \_\_\_\_\_
  5. SOCIAL SECURITY NUMBER: \_\_\_\_\_
  6. HAVE YOU SERVED IN THE ARMED FORCES? ( )YES ( )NO  
IF YES, BRANCH OF SERVICE: \_\_\_\_\_  
DATES SERVED: FROM: \_\_\_\_\_ TO: \_\_\_\_\_ RANK AT DISCHARGE: \_\_\_\_\_  
OCCUPATIONAL SPECIALTY: \_\_\_\_\_
  7. HAVE YOU EVER BEEN EMPLOYED BY THE CITY OF EXCELSIOR SPRINGS BEFORE?  
( )YES ( )NO IF YES, GIVE THE NAME OF THE DEPARTMENT WORKED FOR: \_\_\_\_\_  
FROM: \_\_\_\_\_ TO: \_\_\_\_\_ POSITION HELD: \_\_\_\_\_
  8. DO YOU HAVE A VALID DRIVER'S LICENSE? ( )YES ( )NO STATE ISSUED BY: \_\_\_\_\_
  9. HAVE YOU BEEN CONVICTED OF A CRIME, EXCLUDING MISDEMEANORS AND SUMMARY OFFENSES? ( )YES ( )NO  
IF YES, DESCRIBE IN FULL: \_\_\_\_\_
  10. DID YOU GRADUATE FROM HIGH SCHOOL? ( )YES ( )NO YEAR: \_\_\_\_\_  
IF NO, LAST GRADE COMPLETED: \_\_\_\_\_ DATE YOU LEFT SCHOOL: \_\_\_\_\_  
NAME OF HIGH SCHOOL: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
DO YOU HAVE A CERTIFICATE OF EQUIVALENCY OR G.E.D.? ( )YES ( )NO DATE RECEIVED: \_\_\_\_\_
  11. NAME OF MILITARY, TECHNICAL, TRADE, CORRESPONDENCE OR BUSINESS SCHOOLS ATTENDED:  
NAME: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ SUBJECTS TAKEN: \_\_\_\_\_  
NAME: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_ TO \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ SUBJECTS TAKEN: \_\_\_\_\_

12. NAME OF COLLEGE OR GRADUATE SCHOOLS ATTENDED:

NAME: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_ TO \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOURS: \_\_\_\_\_ DEGREE: \_\_\_\_\_

MAJOR: \_\_\_\_\_ MINOR: \_\_\_\_\_

NAME: \_\_\_\_\_ DATES ATTENDED: \_\_\_\_\_ TO \_\_\_\_\_

ADDRESS: \_\_\_\_\_ HOURS: \_\_\_\_\_ DEGREE: \_\_\_\_\_

MAJOR: \_\_\_\_\_ MINOR: \_\_\_\_\_

13. WORK EXPERIENCE: List below a complete statement of your work history, and any other experience you feel is related to the position you are applying for. Please be accurate. Your experience evaluation will be based on this information. Begin with your last or current employer. Attach additional sheets if needed to fully explain.

DATE (MO / YR)	NAME & ADDRESS OF EMPLOYER SUPERVISOR'S NAME / PHONE	SALARY	POSITION & DUTIES	REASON FOR LEAVING
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				
FROM:				
TO:				

14. MAY YOUR PRESENT EMPLOYER BE CONTACTED? ( ) YES ( ) NO

15. WHAT IS THE MINIMUM SALARY YOU WILL ACCEPT IF APPOINTED? \_\_\_\_\_

16. ARE YOU INTERESTED IN: ( ) PERMANENT FULL-TIME ( ) TEMPORARY ( ) PART-TIME ( ) SUMMER EMPLOYMENT

**PLEASE READ AND SIGN**

17. CERTIFICATE OF APPLICANT: I certify that all answers and statements herein contained are true and complete, and I understand that any misstatement or omission of fact on this application or in any part of the selection process will be sufficient cause for dismissal or disqualification. I hereby authorize the verification of the above information on this application.

Further, I agree to conform to the rules and regulations of the Excelsior Springs Police Department and the employing City of Excelsior Springs. If I am hired, my employment shall be "at-will" and that I may be terminated with or without notice, and with or without cause, at any time at my option or at the sole option of the City. I understand, and agree, that only a written agreement expressly to the contrary executed by me and a duly authorized representative of the City can alter this employment at-will policy and agreement.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_