CITY OF GARNETT
GARNETT, KANSAS

APPLICATION FOR SEASONAL EMPLOYMENT

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion or national origin.

PERSONAL INFORMATION

Date _____ Social Security Number _____

Name _____
(Last) (First) (Middle)

Present Address _____
(Street) (City) (State)

Permanent Address _____
(Street) (City) (State)

Phone Number _____ _____
(Home) (Work)

Referred by _____

EMPLOYMENT DESIRED

Position _____ Date you Can Start _____ Salary Desired _____

Are you employed now? ❑ Yes ❑ No

If so, may we inquire of your present employer? ❑ Yes ❑ No

Have you ever applied with this company before? ❑ Yes ❑ No

Position? _____ When? _____

EDUCATION

	SCHOOL NAME	ADDRESS	DIPLOMA/CERT RECEIVED?	DEGREE & MAJOR
High School				
College				
Other				

Subjects of Special Study or Research Work _____

EMPLOYMENT RECORD

DATES	NAME & ADDRESS OF EMPLOYER	JOB TITLE AND BRIEF DESCRIPTION OF DUTIES	SALARY	REASON FOR LEAVING
From: **To:**	**_____** **_____** **_____** **_____** **Telephone:_____**	**_____** **_____** **_____** **_____** **Supervisor:_____**	**From:** **To:**	**_____** **_____** **_____** **May we contact them?**
From: **To:**	**_____** **_____** **_____** **_____** **Telephone:_____**	**_____** **_____** **_____** **_____** **Supervisor:_____**	**From:** **To:**	**_____** **_____** **_____** **May we contact them?**
From: **To:**	**_____** **_____** **_____** **_____** **Telephone:_____**	**_____** **_____** **_____** **_____** **Supervisor:_____**	**From:** **To:**	**_____** **_____** **_____** **May we contact them?**
From: **To:**	**_____** **_____** **_____** **_____** **Telephone:_____**	**_____** **_____** **_____** **_____** **Supervisor:_____**	**From:** **To:**	**_____** **_____** **_____** **May we contact them?**

PERSONAL REFERENCES (Not former Employers or Relatives)

Name	Address	Phone Number

Can you perform the essential functions of this job, either with or without reasonable accommodation? ❑ Yes ❑ No

In Case of
Emergency Notify _____
(Name) (Address) (Phone Number)

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Date _____Signature _____

DO NOT WRITE BELOW THIS LINE

Interviewed by _____ Date _____

REMARKS _____

_____

Neatness _____ Ability _____

Hired _____For Dept. _____

Position _____Start Date _____Salary Wages _____

Approved:

1._____2._____3._____
Employment Manager Dept. Head City Manager