



City of Diamond
Application for Employment

The City of Diamond is an EQUAL OPPORTUNITY EMPLOYER and does not discriminate based on race, color, religion, creed, marital status, national origin, sex, age, disability, genetic information, disability, sexual orientation or any other protected status.

General Information

Position applying for: _____

Last Name: _____ First Name: _____ Middle Name: _____

Present Address: _____

City: _____ State: _____ Zipcode: _____

Are you 18 years of age or older? **Yes No**

Do you have a valid driver's license? **Yes No** Driver's License Number: _____

Have you ever been employed by the city of Diamond? **No Yes** and Dates: _____

Do you have any friends and/or family who are currently employed by the City of Diamond? **Yes No** If yes what is their name? _____

Are you presently employed? **Yes No** If yes may we contact them _____

Have you ever been terminated from employment or asked to resign by an employer? ___

If yes please provide company name and details _____

How did you find out about this opportunity? Walk-in Facebook Referral Other: ___

Education and Training

Name/Address of School	Diploma/Degree	Course of Study
High School/ GED: _____		

College/University: _____		
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Vocational or Trade: _____		
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Any other certifications: _____

Military Record

Branch of Service: _____ Dates of Service: _____

Work History

Include the last 7 years of employment , including periods of unemployment, starting with the most recent employer.

Employer Name: _____ Job Title: _____

Date Employed:(Month/Year): _____ PayRate: _____

Phone number: _____ Supervisor Name: _____

Job Duties:

Employer Name: _____ Job Title: _____

Date Employed:(Month/Year): _____ PayRate: _____

Phone number: _____ Supervisor Name: _____

Job Duties:

Employer Name: _____ Job Title: _____

Date Employed:(Month/Year): _____ PayRate: _____

Phone number: _____ Supervisor Name: _____

Job Duties:

Employer Name: _____ Job Title: _____

Date Employed:(Month/Year): _____ PayRate: _____

Phone number: _____ Supervisor Name: _____

Job Duties:

City of
Diamond
Gem City of the Ozarks

I attest with my signature below that all of the above employment application information is true and complete to the best of my knowledge and I authorize the City of Diamond to verify their accuracy and to obtain reference information on my work performance, dates of employment and pay rate. I hereby release the City of Diamond from any/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 understand that, if employed, a falsified statement of any kind or omission of facts called for on this application shall be considered sufficient basis for disciplinary action and possible termination of my employment.

I understand that if I become an employee of the City of Diamond, I must fully adhere to the policies, rules and regulations of the City of Diamond. I understand that any employment offer is conditional on completion of my employment application, interview and employment process. I understand that any employment offer may be withdrawn by the City at any time before my start date, for any reason and in the sole discretion of the City.

Signature

Date