



## CITY OF WESTMORELAND APPLICATION FOR EMPLOYMENT

### APPLICANT INFORMATION

Date of Application : \_\_\_\_\_ Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Email: \_\_\_\_\_

Last Name: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Date Available : \_\_\_\_\_ Desired Rate of Pay : \_\_\_\_\_

Position Applied For: \_\_\_\_\_

Are you a citizen of the United States? Yes No

If no, are you authorized to work in the US? Yes No

Have you ever worked for the City before? Yes No

If so, when? \_\_\_\_\_

Have you ever been convicted of a felony? Yes No

If yes, please explain: \_\_\_\_\_

### EDUCATION

High School \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? Yes No

College \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? Yes No

Degree \_\_\_\_\_

Other \_\_\_\_\_ Address \_\_\_\_\_

Did you graduate? Yes No

Degree \_\_\_\_\_

**REFERENCES**

Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_  
Address \_\_\_\_\_ Phone # \_\_\_\_\_

**PREVIOUS EMPLOYMENT**

Company \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Wage \_\_\_\_\_ Ending Wage \_\_\_\_\_  
Responsibilities \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your previous supervisor for a reference? Yes No

Company \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Wage \_\_\_\_\_ Ending Wage \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your previous supervisor for a reference? Yes No

Company \_\_\_\_\_ Phone # \_\_\_\_\_  
Address \_\_\_\_\_  
Job Title \_\_\_\_\_ Supervisor \_\_\_\_\_  
Starting Wage \_\_\_\_\_ Ending Wage \_\_\_\_\_  
From \_\_\_\_\_ To \_\_\_\_\_  
Reason for Leaving \_\_\_\_\_  
May we contact your previous supervisor for a reference? Yes No

**MILITARY SERVICE**

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_  
Rank at Discharge \_\_\_\_\_ Type of discharge \_\_\_\_\_  
If other than honorable, explain: \_\_\_\_\_

**DISCLAIMER AND SIGNATURE**

*I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

---

---

Signature \_\_\_\_\_ Date \_\_\_\_\_

---

---

City of Westmoreland  
202 Main Street, PO Box 7  
Westmoreland, KS 66549

*The City of Westmoreland, Kansas is an equal opportunity employer*