

Application for Employment

Name _____

Address _____

Telephone () _____ Social Security # _____

Indicate the position(s) for which you are applying (1) _____ (2) _____

Park Preference _____ Do you wish to work: Full time ___ Part time ___ Temporary ___

If part time, specify hours or days _____

Date available for work _____ Salary Expected _____

Do you have any physical limitations/handicaps that would prevent you from performing this job? Yes ___ No ___

If yes, explain _____

EDUCATIONAL DATA

School	Print name and address for each school listing	No. of years completed	Degree, Major or type of course
High School			
College			
Graduate School			
Trade or Business School			
Other			

GENERAL INFORMATION

Are you a U. S. Citizen? Yes ___ No ___

If not, are you prevented from becoming legally employed because of visa or immigration status? Yes ___ No ___

Are you 18 years of age or over? Yes ___ No ___ If no, date of birth _____

Have you ever been convicted of a criminal offense? Yes ___ No ___ If yes, when _____?

Are any of your relatives employed here? Yes ___ No ___

If yes, please list name and department: _____

REFERENCES (not employers or relatives - at least three)

Name and Address	Occupation	Phone

EMPLOYMENT HISTORY

List present employer or most recent employer first.
 May we contact these employers? Yes ___ No ___

Employer		Employed From _____ Mo/Yr To _____ Mo/Yr	Supervisor's Name
Address			Your Job Title
Telephone			
Your Salary		Duties:	
Start	End		
Reason for Leaving:			
Employer		Employed From _____ Mo/Yr To _____ Mo/Yr	Supervisor's Name
Address			Your Job Title
Telephone			
Your Salary		Duties:	
Start	End		
Reason for Leaving:			
Employer		Employed From _____ Mo/Yr To _____ Mo/Yr	Supervisor's Name
Address			Your Job Title
Telephone			
Your Salary		Duties:	
Start	End		
Reason for Leaving:			

Please read and sign:

The facts set forth in my application are true and complete. I understand that if employed, and false statement can result in my immediate dismissal. This application is not a contract of employment, nor can any employee of KCPRC enter into a contract of employment with me without the approval of the director of KCPRC. KCPRC reserves the right to change, interpret, withdraw, and/or add to the policies at its sole discretion, without prior notice or approval by an employee group. If I am hired, my employment can be terminated with or without cause at any time at the discretion of either KCPRC or myself. I hereby give permission to contact the previous employers and character references that I have listed except for the particular employers here noted.

This application will remain active for 30 days.

Signature of Applicant _____ Date _____