

Consolidated PWSD No. 2 of Lafayette, Johnson & Saline Counties

1801 Walnut Street
Higginsville, MO 64037

Phone: 660-584-2344
Fax: 660-584-7650

email: TWINTER@CPWSD2LJS.COM

Job Application

Personal Information

Last	First	MI	SSN#	Email
Street Address	City	ST	Zip	Home Phone Mobile Phone
Are you entitled to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		Are you 18 or older? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Military Service? <input type="checkbox"/> Yes <input type="checkbox"/> No		Branch	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	War
What position are you applying for?		How did you hear about this position?		
Expected Hourly Rate	Expected Weekly Earnings	Date Available		

Prior Work Experience

	Current or Most Recent		Prior		Prior	
Employer						
Address						
City, ST, ZIP						
Telephone						
Name of Immediate Supervisor						
Dates of Employment	From	To	From	To	From	To
Position/Job Title						
Pay						
Reason for Leaving						
May We Contact	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Education

	Name/Location	Last Year Complete	Degree	Major or Emphasis
High School		9 10 11 12		
College/University		1 2 3 4		
Trade School				
Other				
List any applicable special skills, training or proficiencies.				

Personal References

	Reference 1	Reference 2	Reference 3
Name			
Address			
City, ST, ZIP			
Telephone			

Disclaimer - By signing, I hereby certify that the above information, to the best of my knowledge, is correct. I understand that falsification of this information may prevent me from being hired or lead to my dismissal if hired. I also provide consent for former employers to be contacted regarding work records.

Signature	Date
-----------	------