



690 Chesterfield Parkway West Chesterfield, MO 63017
 Main Line: (636) 537-4000 Fax: (636) 537-4798
www.chesterfield.mo.us

Application for Employment

The City of Chesterfield is an equal opportunity employer. In accordance with federal, state, and local laws, we recruit, hire, promote, and evaluate all personnel without regard to race, color, religion, gender, age, national origin, citizenship status, physical or mental disability, past, present, or future status in the uniformed services of the United States. Job applicants and present employees are evaluated solely on ability, experience, and the requirements of the job.

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Applying For Position			
The City will make a good faith effort to provide reasonable accommodation to an otherwise qualified candidate who applies for a position or employee who is able to perform the essential job duties unless such accommodation would impose an undue hardship on the operation of the City. Applicants requiring disability related accommodations should request them in advance.			
To the best of your knowledge, would you be able to perform all the essential functions of this position with or without reasonable accommodations? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.? YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for the City?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?
Are you related to any City official or employee of the City of Chesterfield?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain
Have you ever been convicted of a felony?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Diploma
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
Other		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

EMPLOYMENT HISTORY			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone ()	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

