

Date: _____

Department: _____



380 Scarbrough Street
Richland, MS 39218

APPLICATION FOR SUMMER EMPLOYMENT

NAME IN FULL (First, Middle, Last) SOCIAL SECURITY NUMBER

PRESENT ADDRESS CITY STATE ZIP PHONE NO.

PERMANENT HOME ADDRESS (IF DIFFERENT FROM ABOVE)

Do you have the legal right to work in the United States? _____

Have you ever applied for work at the City of Richland, Mississippi? _____ If yes, when? _____

Have you every been employed at the City of Richland, Mississippi? _____ If yes, when? _____

What department did you work in? _____

Do you have any friends or relatives employed by the City of Richland, Mississippi? _____
If so, whom? _____

Do you have a valid driver's license? _____ Yes _____ No
State: _____ DL No. _____ Exp Date: _____

Are you willing to drive a motor vehicle as part of your duties? _____ If so, what is your date of birth? _____
(This information is required for a motor vehicle records check to be obtained from the state. The answer to this question will not be used to discriminate against you in violation of the law.)

Are you under the age of 18 years? _____ If so, when is your date of birth? _____

Have you ever been convicted of a crime (do not include parking tickets)? _____ Yes _____ No

If yes, give date, nature of conviction and place of conviction. _____

If you are a student, where do you attend school? _____

IN CASE OF EMERGENCY

Please Print Name Relationship Phone Number

Please Print Name Relationship Phone Number