



Employment Application

We consider applicants for all positions without regard to race, color, national origin, age, religion, sex, marital or veteran status, the presence of a medical condition, disability or any other legally protected status.

Position for which you are applying _____

PERSONAL DATA:

Date of Application _____

Name _____
Last First Middle Initial

Current Address _____
Street/Box

City State Zip Code

E-Mail Address _____

Phone Number _____

Are you eligible to work in the United States? Yes _____ No _____

Date you are available for employment _____

EDUCATION/TRAINING:

Schools attended. Begin with the most recently attended school first. List all applicable information.

Name of School/Location	Major/Minor Fields	Degree/Certification
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

WORK EXPERIENCE:

Please provide a complete listing of all other jobs or administrative positions you have held in the past 10 years. Attach additional sheets if necessary.

Company Name	Position/Title	Dates Employed	Reason for Leaving

GENERAL INFORMATION:

Have you ever been convicted of a felony or offense involving moral turpitude (including, but not limited to indecency with a minor)? Yes_____ No_____

If yes, please state where, when and the nature of the offense _____

(Conviction of a felony is not an automatic bar to employment.) Full background check will be conducted.

Have you ever had a teaching license/certification suspended or revoked? Yes_____ No_____

If yes, please state where, when and the nature of the offense _____

REFERENCES: Please list below references who may be contacted regarding your work history, if you have not provided letters of reference. Include all managers/supervisors who evaluated or supervised your performance.

1. Reference Name _____

Position/Title _____

Full Name of Business _____

Mailing Address _____

Complete Telephone Number _____

2. Reference Name _____

Position/Title _____

Full Name of School District or Business _____

Mailing Address _____

Complete Telephone Number _____

3. Reference Name _____

Position/Title _____

Full Name of School District or Business _____

Mailing Address _____

Complete Telephone Number _____

READ CAREFULLY

Releases

In connection with my application for employment and as a condition of continuing employment, I understand that investigative background inquiries may be made on me including previous employers, schools, consumer credit, criminal convictions, motor vehicle, and other reports. These reports will include information as to my character, work habits, performance, education, compensation, and experience along with reasons for termination of employment from previous employers. Additionally, I understand that the Missouri Military Academy may be requesting information from various federal, state, and other agencies which maintain records concerning my past activities relating to my driving, credit, criminal, civil, and other experiences as well as claims involving me in the files of insurance companies. **I have read this information carefully. I understand that if I have any questions about these reports, I may contact Human Resources Department at 573-581-1776.**

Initials _____

I authorize, without reservation, any party or employer contacted to furnish the above mentioned information and release all parties involved from liability and responsibility for doing so. I voluntarily and knowingly waive all rights

to bring an action for defamation, invasion of privacy, or similar causes of action, against anyone providing or seeking such information. This authorization and consent shall be valid in original, fax, or copy form.

All hiring and employment at the Missouri Military Academy is at-will. I understand this application is not an employment contract, nor can it be used to create one. Employment by the Missouri Military has no specific term and may be terminated by the employee or Missouri Military Academy with or without notice. I acknowledge that Missouri Military Academy has not made any promises or representations that differ from those contained in this paragraph.

I understand I must provide satisfactory documents to establish my identity and right to work in the United States, if I am offered a position with the Missouri Military Academy, and that failure to provide this evidence will result in the termination of my employment.

I understand that if I am offered a position with the Missouri Military Academy, I will be required to have a drug test. If a drug test indicates the use of illegal substances, the offer of employment will be withdrawn.

I release and agree to hold harmless any individual, employer, business institution or government employer from all liability with regard to furnishing information to the Missouri Military Academy. I agree to release and hold harmless the Missouri Military Academy from all liability with respect to the receipt of such information.

I certify that I have and will provide information throughout the hiring process, including the information on this application form and in interviews that is true and complete. I further certify that I have and will answer all questions to the best of my ability and that I have and will not withhold any information that would unfavorably affect my application for employment. I understand that if any misrepresentation or omission has been made by me verbally or in writing, any offer of employment made to me may be withdrawn or my subsequent employment may be terminated.

Signature of _____ Date _____
Applicant

RETURN APPLICATION TO:
Amy Groves
Director of Human Resources
Missouri Military Academy
204 North Grand
Mexico, MO 65265
or
Amy.Groves@MissouriMilitaryAcademy.com