

Building location

Rev. July 2016

For Office Use Only:

Drug	___	I-9	___
Driver's	___	Tax Info	___
Background	___	Address	___

MISSOURI DEPARTMENT OF TRANSPORTATION
APPLICATION FOR EMERGENCY SNOW REMOVAL EMPLOYMENT
 AN EQUAL OPPORTUNITY EMPLOYER

To be considered for an Emergency Snow Removal position, applicants must be at least 18 years of age, possess and maintain a valid Commercial Driver's License (CDL) Class A or B with no airbrake restrictions and successfully complete a criminal background check, driver's license check and drug screening.

PERSONAL DATA: ALL APPLICANTS MUST COMPLETE SECTION 1

Date of Application

Print name as typed
on Social Security Card

(LAST)

(FIRST)

(MIDDLE)

Present Address:

(STREET)

(CITY)

(STATE & ZIP)

County of Residence:

Telephone Number:

Daytime Phone Number

Other Phone Number

Email Address:

Mailing Address Same as Home Address: Yes No (if no, complete below)

Mailing Address:

Address

City

State & Zip

Are you at least 18, a high school graduate or possess a GED? Yes No

Are you a U. S. Citizen? Yes No

If not a citizen, can you submit verification that you are lawfully available for employment in this country? Yes No

Do you possess a valid driver's license? Yes No State Issued:

If yes, please designate license number:

If you have a valid commercial driver's license (CDL):

CDL Driver Status:

What class do you have?

EI (Excepted Interstate)

What endorsements do you have?

NI (Non-excepted Interstate)

What restrictions do you have?

EA (Excepted Intrastate)

NA (Non-excepted Intrastate) _____

CDL Expiration Date:

EMPLOYMENT HISTORY:

Have you previously worked for MoDOT? Yes No

If yes, please list titles and dates

SPECIAL SKILLS – LABOR AND TRADES:

Check any of the following skills that you have, based on training or experience:

Snowplow Pickup Truck Auto/Truck Mechanical Repair Backhoe

Farm Tractor Motorgrader Heavy Excavation Equipment Dump Truck

Front End Loader Other Skills (list)

MILITARY RECORD: ALL APPLICANTS MUST COMPLETE

If you are a male between 18 and 26 years of age, have you registered with the Selective Service System? Yes No

Have you ever served in the U S Military Service? Yes No

If yes, a) Are you an honorably discharged veteran? Yes No

b) State branch and period of active service

(Branch)

(Period of Active Service)

NOTE: A dishonorable or general discharge is not an absolute bar to employment and other factors will affect the final decision regarding employment.

Failure to complete and sign the application and the following forms: **“DRUG TESTING, ALCOHOL TESTING, “AUTHORIZATION TO RELEASE INFORMATION CONSENT” will cause your application to not be considered for employment.**

(Check Application carefully before signing)

I certify that the information provided herein is true and complete to the best of my knowledge. I understand misrepresentation or omission of information on this application and/or inserts, including relatives working for the department, educational attainments, work history, professional credentials, criminal history, etc. is cause for rejection of my application or subsequent dismissal from employment.

Signature

MISSOURI DEPARTMENT OF TRANSPORTATION

This form must be completed and returned with your application. Please be sure to sign and date.

DRUG TESTING, ALCOHOL TESTING, AND PRE-EMPLOYMENT, POST-OFFER MEDICAL EXAMINATION CONSENT

Drug Testing: It is the intent of the Missouri Department of Transportation (MoDOT) to provide a drug-free work place to protect the health and safety of employees and the general public. All applicants offered employment with the department must successfully pass a urine specimen drug test, at department expense. Applicants who fail the drug test, or applicants who refuse to be tested or fail to report for a drug test, will not be considered again for employment. I understand that any employment offer will be contingent upon my passing the drug test.

I understand if I am employed in a job requiring a commercial driver's license at the time of my termination from MoDOT, the department has my permission to release any drug test and/or alcohol test results to an employer requesting this information.

AUTHORIZATION TO RELEASE INFORMATION CONSENT

I understand and agree that upon submission of this online application:

- My basic contact information (name, address, phone, e-mail) will be available to MoDOT recruiting staff so that I may be contacted about the position for which I am applying.
- I understand that, in order to be considered for a specific advertised vacancy, I must update my online application to indicate the vacancies I wish to be considered for and submit the updated MoDOT Employment Application. This application is only for Emergency Snow Removal.
- I certify that the information provided herein is true and complete to the best of my knowledge. I understand misrepresentation or omission of information on this application and/or inserts, including relatives working for the department, educational attainments, work history, professional credentials, etc., is cause for rejection of my application or subsequent dismissal from employment.
- It is the intent of MoDOT to provide a drug-free work place in order to protect the health and safety of employees and the general public. All applicants offered employment with the department must successfully pass a urine specimen drug test, at department expense. Applicants who fail the drug test, or applicants who refuse to be tested or fail to report for a drug test, will not be considered again for employment. I understand that any employment offer will be contingent upon my passing the drug test.
- I understand if I am employed in a job requiring a commercial driver's license at the time of my termination from MoDOT, the department has my permission to release any drug test and/or alcohol test results to an employer requesting this information.
- I hereby authorize MoDOT to receive any and all information concerning my employment record, driving record, education record, military record, and the release of any information pertaining to drug and/or alcohol testing and physical examination/health screening results with a previous employer or as part of my potential employment with MoDOT.
- I understand this is specifically intended to include any and all information of a confidential nature as well as photocopies of such documents, if requested. I understand this information will be used for the purpose of determining my eligibility for employment with MoDOT.
- I authorize the Missouri Department of Revenue to furnish MoDOT information regarding the status of my driver's license.
- I authorize the Missouri State Highway Patrol to conduct a background check on me and to furnish MoDOT any information regarding my criminal history. I understand that MoDOT will only request a background check if a conditional offer of employment is extended. I understand such authorization may require the submittal of my fingerprints and that this authorization includes checks for any pending charges and convictions for a misdemeanor or a felony. I understand that a conviction of a violation of the law is not an automatic bar to employment and each case is considered on an individual basis. If a conditional offer of employment is extended by MoDOT, I agree to voluntarily provide my social security number and fingerprint submittal as required by MoDOT and understand that failure to provide such may result in the withdrawal of a conditional job offer. I do hereby release and forever discharge MoDOT and its officers, agents, and employees from any and all liability arising out of or in any manner relating to the performance of the background check and the disclosure of any information with regard thereto.

I confirm that I have read and understand the above paragraphs and the information that I am providing is true and accurate to the best of my knowledge. I agree and give permission for MoDOT to use the personal data submitted for the above purposes.

Applicant's Printed Name

(LAST)

(FIRST)

(MIDDLE)

If you were previously employed under a different name(s), please specify

Applicant's Signature

Date

MISSOURI DEPARTMENT OF TRANSPORTATION
LOCATIONS AND CONTACT INFORMATION

Mail or deliver your completed Emergency Snow Removal application to your nearest MoDOT District office:

Location	Address	Telephone Number
Northwest District	3602 North Belt Highway St. Joseph, MO 64506-1399 Attn: Human Resources	816-387-2350 816-387-2359 (fax)
Northeast District	1711 S. Hwy 61 Hannibal, MO 63401 Attn: Human Resources	573-248-2617 573-526-0069 (fax)
Kansas City District	Kansas City Area District 600 NE Colbern Road Lee's Summit, MO 64086 Attn: Human Resources	816-622-6500 816-622-0369 (fax) 816-622-6320 (fax)
St. Louis District	1590 Woodlake Drive Chesterfield, MO 63017-5712 Attn: Human Resources	314-275-1500 573-526-0089 (fax)
Southwest District	3025 East Kearney M.P.O. Box 868 Springfield, MO 65801 Attn: Human Resources	417-829-8031 417-895-7716 (fax)
Southeast District	3956 East Main Willow Springs, MO 65793 Attn: Human Resources	573-472-5333 417-469-3966 (fax)