

Emergency Contact Information _____
Name Phone

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Name Date

The City of McLeansboro shall not unlawfully discriminate on the basis of race, color, sex, national origin, age or handicap in admission to, or treatment or employment in, programs or activities.