

EMPLOYMENT APPLICATION

PERSONAL

Name: (Last) (First) (Middle) Telephone:

Address: (Street) (City) (State) (Zip Code)

OTHER EMPLOYMENT RELATED INFORMATION

Check the following options which you would consider:
Full Time
Part Time
Temporary

List any relative working for this County:
Name Department

If a minor, age:

Can you submit a birth certificate or other proof of U.S. citizenship after employment?
Yes No

If not a U.S. citizen, can you submit verification of your legal right to work permanently in the U.S. after employment?
Yes No

Were you previously employed by this County?
Yes No
Dates:

Have you ever been convicted of a felony or been convicted of a misdemeanor resulting in imprisonment or a fine over \$500 during the last ten years? (Conviction will not necessarily disqualify an applicant.)

Do you have the ability to perform the job related functions of the job applied for?
Yes No

If the answer to the above question is no, please describe what accomodations would enable you to perform the job related functions of the job applied for.

EDUCATION & TRAINING

High School City Graduated Yes No

College or University City Major Degree / Year

Trade School or Other City Completed Yes No

Year Completed

List any other education, training, special skills, or certificates / licenses that you possess related to this job:

List any machines or equipment that you are qualified and experienced at operating:

REFERENCES

List 3 references known by you for at least 3 years, who are not related to you.

Name Title Phone Years Known
1.
2.
3.

EXPERIENCE

List the last 2 year's work experience beginning with the most recent:

Name of Employer	Type of Business			
Address	City	State	Zip	Phone
Dates Employed	Name of Supervisor	Reason for leaving		

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<p style="text-align: center;">DRIVERS</p> <p>Do you have a valid driver's license in this state?</p> <p style="text-align: center;">_____ Yes _____ No</p> <p>If yes, license number: _____</p> <p>List license type: _____</p>	<p style="text-align: center;">POSITION APPLYING FOR</p> <p>_____ Laborer</p> <p>_____ Truck Driver</p> <p>_____ Mechanic</p> <p>_____ Equipment Operator</p> <p>_____ Courthouse Deputy</p> <p>_____ Janitorial</p> <p>_____ Other (Be Specific)</p>
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List any moving violations during the last five years on a separate page.

APPLICANT'S CERTIFICATION

Please read carefully before signing. If you have any questions regarding the following statements, please ask for assistance.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statement made by me in this application are correct and complete. I understand that any false information contained in this application may result in my discharge.

I authorize you to communicate with my former employers, school officials and persons named as references. I hereby release all employers, schools and individuals from any liability for any damage whatsoever resulting from giving such information.

I understand that as this County deems necessary, I may be required to work overtime hours or hours outside a normally defined workday or workweek. If employed, I understand and agree that such employment may be terminated at any time for any reason not prohibited by law and without any continuation of salary, wages, or employment related benefits (not required by law).

Date _____ Signature _____

The submission of a completed application to the County does not guarantee employment and does not constitute an offer of employment.

EEO/ADA Statement: This County does not discriminate on the basis of religion, sex, age, national origin, political affiliation, mental or physical disability in its hiring or employment practices.