APPLICATION FOR EMPLOYMENT

We are an equal opportunity employer. We consider applicants without regard to race, color, religion, sex, national origin, age, marital status, disability, or any other legally protected status. The County also complies with applicable veteran's preference requirements.

Name: _____
Last Name First Name Middle Name

Address: _____
Address City State Zip

Social Security Number (optional) _____ Date of Birth _____/_____/_____

(*this information is used to conduct a background investigation)*

Telephone Number: _____ Today's Date: _____

Position Applying For: _____

Are you at least 18 years of age? ☐ YES ☐ NO

Are you legally able to be employed in the U.S.? ☐ YES ☐ NO

May we contact your present or past employers? ☐ YES ☐ NO

Are you related to anyone who works for the County? ☐ YES ☐ NO if yes who:_____

Have you ever been convicted of a crime other than a minor traffic violation?
☐ YES ☐ NO A yes answer does not automatically disqualify you from employment, if yes please explain:_____

Are you able, either with or without reasonable accommodations, to perform the functions of the job for which you are applying? ☐ YES ☐ NO

Are you a U.S. Veteran? ☐ YES ☐ NO *those wishing to claim veteran's preference must submit proof*

Education

Years completed in high school: _____ Name of High School: _____

Years completed in College: _____ Degree or Diploma Received:_____

Describe your course of study: _____

Have you received any additional training, courses, or volunteer work, etc:_____

_____

Do you have any other experience or qualifications not listed which relate to the job applied for? _____

_____

Employment History

Start with your present or last job, include any job-related military service assignments and volunteer activities. If you need additional space, please continue on a separate sheet of paper.

1. Present Employer: _____ Phone: _____

   Address: _____
   Address City State Zip

   Dates employed: _____ ☐ Full Time ☐ Part Time

   Your Title: _____ Supervisor: _____

   Specific Duties: _____

   _____

   _____

   Reason for leaving: _____

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2. Past Employer: _____ Phone: _____

   Address: _____
   Address City State Zip

   Dates employed: _____ ☐ Full Time ☐ Part Time

   Your Title: _____ Supervisor: _____

   Specific Duties: _____

   _____

   _____

   Reason for leaving: _____

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3. Past Employer: _____ Phone: _____

   Address: _____
   Address City State Zip

   Dates employed: _____ ☐ Full Time ☐ Part Time

   Your Title: _____ Supervisor: _____

   Specific Duties: _____

   _____

   _____

   Reason for leaving: _____

If required for the position please answer the following questions:

Do you possess a valid Iowa driver's license: ☐ YES ☐ NO

Do you possess a valid Iowa commercial driver's license ☐ YES ☐ NO

Please indicate in the space below and on additional blank sheets, in necessary, such experience, training, skills, or abilities that you believe will qualify you for the position for which this application is filed.

_____

_____

_____

_____

_____

_____

_____

_____

_____

Applicant's Statement

I certify that the answers given herein are true and complete to the best of my knowledge.

In applying for employment, I want the County to be fully informed of my previous record and I hereby authorize the County to investigate my background and to obtain any and all information which may concern me. I hereby release all persons, schools, companies, law enforcement agencies, and other organizations or employers from any liability on account of furnishing such information.

If an employment relationship is established, I understand that I have the right to terminate my employment at any time. The County may terminate my employment at any time and for any reason unless otherwise provided by law.

I understand that any withholding of information or misrepresentation on this application or on County medical forms could result in rejection for employment, or if employed, termination from the County.

_____ _____

Signature of Applicant Date