

**READ CAREFULLY**

**Please make sure all required information is included with this application, per the job vacancy announcement**

1. Did you sign and date your application?
2. Have you read the job announcement to see what attachments must be submitted?
3. Have you checked boxes in Section 3 to indicate what attachments you have included?
4. Did you indicate the specific Position Title and Position Number in Section 2?
5. Did you include a complete address for each employer listed in Section 7?
6. If you are claiming Veterans Employment Preference or Persons with Disabilities Employment Preference, have you completed and attached the Employment Preference Form and Documentation?
7. Did you attach all the application materials required by the vacancy announcement?



**SECTION 3: SIGNATURE**

My signature below certifies that all information on this and all attached pages (checked below) are true, correct and complete to the best of my knowledge and contain no willful falsifications or misrepresentations. Falsifications or misrepresentations may disqualify me from consideration for employment with the County or, if hired, may be grounds for termination at a later date. Employers may be contacted as references unless noted otherwise.

In the spaces below, I have checked attachments, including those required in the job announcement.

- Responses to Supplement Questions
- Employment Preference Form / Documentation
- Other (Please Specify)
- 
- Transcripts
- Resume
- Typing /Ten-Key Certification
- Additional Employment Experience

Signature \_\_\_\_\_

Date \_\_\_\_\_

**SECTION 4: EDUCATION**

You may respond to this section on a separate sheet of paper if all relevant blocks are completed and follows the same format provided.

High School Name \_\_\_\_\_

Address \_\_\_\_\_

Received Diploma or Equivalency Certificate? \_\_\_\_\_ YES \_\_\_\_\_ NO

If NO, what is the highest grade you completed: \_\_\_\_\_

College, University, Other Schools & Training Courses (Name & Location)	Dates Attended	Degree/Certificate Received	Date of Degree/Certificate	Major/Minor Field	Credits Earned

**SECTION 5: ENDORSEMENTS**

List current Professional Licenses, Registration, or Certifications (engineering, medical CPA, etc.)

Licensing Agency (Name & Location)	Type of License	Endorsement/Restriction (If Applicable)	Date Licensed

**SECTION 6: OTHER SKILLS**

List other skills, education, experience and abilities below. You may also include a list of equipment that you know how to use. (If you need more space, continue on an attached sheet of paper.)


**SECTION 7: EXPERIENCE**

List your work and/or volunteer experience with emphasis on experience that is relevant to the position for which you are applying. **Begin with your present or most recent experience.** Include military service that would help you qualify. You may continue this section on a separate sheet of paper if all the same format is followed. Include your name and the job title for which you are applying on each sheet. **This information must be completed even if a resume is submitted.**

**Notice to applicants:** Information that you provide on this application is subject to verification. Previous employers may be contacted as references.

Do you want to be informed before we contact your present employer?  Yes  No

**Present Employer:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_  
*Address* *City, State* *Zip Code*

**Type of Business:** \_\_\_\_\_ **Your Job Title:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ **Total Time Employed:** \_\_\_\_\_

**Avg. Hrs. Per Week:** \_\_\_\_\_ **Employment Type:**  Full-Time  Part-Time  Volunteer

**Supervisor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Describe your duties, including knowledge, skills, abilities required, employees supervised and accomplishments:**


**Reason for Leaving:** \_\_\_\_\_

**Name of Employer:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_  
*Address* *City, State* *Zip Code*

**Type of Business:** \_\_\_\_\_ **Your Job Title:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ **Total Time Employed:** \_\_\_\_\_

**Avg. Hrs. Per Week:** \_\_\_\_\_ **Employment Type:**  Full-Time  Part-Time  Volunteer

**Supervisor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Describe your duties, including knowledge, skills, abilities required, employees supervised and accomplishments:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reason for Leaving:**

\_\_\_\_\_

**Name of Employer:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_  
*Address* *City, State* *Zip Code*

**Type of Business:** \_\_\_\_\_ **Your Job Title:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ **Total Time Employed:** \_\_\_\_\_

**Avg. Hrs. Per Week:** \_\_\_\_\_ **Employment Type:**  Full-Time  Part-Time  Volunteer

**Supervisor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Describe your duties, including knowledge, skills, abilities required, employees supervised and accomplishments:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Reason for Leaving:**

\_\_\_\_\_

**Name of Employer:** \_\_\_\_\_

**Complete Address:** \_\_\_\_\_  
*Address* *City, State* *Zip Code*

**Type of Business:** \_\_\_\_\_ **Your Job Title:** \_\_\_\_\_

**Dates Employed:** \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ **Total Time Employed:** \_\_\_\_\_

**Avg. Hrs. Per Week:** \_\_\_\_\_ **Employment Type:**  Full-Time  Part-Time  Volunteer

**Supervisor:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**Describe your duties, including knowledge, skills, abilities required, employees supervised and accomplishments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason for Leaving:** \_\_\_\_\_