

Perry County Employment Application

Department:

Address:

EMPLOYER: COMPLETE THIS SECTION

Email/Phone Number:

TO ALL APPLICANTS:

In completing your application, please be sure to provide as much detail as possible. Answer all questions thoroughly. Type or print clearly. Be sure your signature and the date appear on the last page of the application. Return the completed application using the address above.

Personal Information

Name: _____ Date: _____
Last, First Middle

Address: _____

Phone #: _____ Email: _____

Positions applied for in order of preference:

1. _____ Rate of pay desired \$ _____ per _____

2. _____ Rate of pay desired \$ _____ per _____

Date available to start work: _____

What type of job are you looking for? ☐ Regular ☐ Temporary ☐ Full-Time ☐ Part-Time

Can you perform, with or without accommodation, the essential job requirements of the specific job(s) for which you are applying? ☐ Yes ☐ No

If no, please explain:

Employment History (List most recent first). Use additional sheet if necessary.

Name of Employer: _____ Phone #: _____

Address: _____

Name & Title of Supervisor: _____

Job Title: _____

Date of Employment: _____ to _____ Salary: Beginning \$ _____ Ending \$ _____

Describe Responsibilities: _____

Reason for Leaving: _____

Employment History (continued)

| | |
|---|----------------|
| Name of Employer: _____ | Phone #: _____ |
| Address: _____ | |
| Name & Title of Supervisor: _____ | |
| Job Title: _____ | |
| Date of Employment: _____ to _____ Salary: Beginning \$_____ Ending \$_____ | |
| Describe Responsibilities: _____ | |
| Reason for Leaving: _____ | |

| | |
|---|----------------|
| Name of Employer: _____ | Phone #: _____ |
| Address: _____ | |
| Name & Title of Supervisor: _____ | |
| Job Title: _____ | |
| Date of Employment: _____ to _____ Salary: Beginning \$_____ Ending \$_____ | |
| Describe Responsibilities: _____ | |
| Reason for Leaving: _____ | |

Education

| Type | Name and address | Years Completed | Degree | Major |
|--------------------|------------------|---|--------|-------|
| High School | | <u> </u> 1 <u> </u> <u> </u> 2 <u> </u> <u> </u> 3 <u> </u> <u> </u> 4 | | |
| College* | | <u> </u> 1 <u> </u> <u> </u> 2 <u> </u> <u> </u> 3 <u> </u> <u> </u> 4 | | |
| Post Graduate* | | <u> </u> 1 <u> </u> <u> </u> 2 <u> </u> <u> </u> 3 <u> </u> <u> </u> 4 | | |
| Business or Trade* | | <u> </u> 1 <u> </u> <u> </u> 2 <u> </u> <u> </u> 3 <u> </u> <u> </u> 4 | | |
| Other | | | | |

References

List three professional references. PREFERABLY CURRENT OR FORMER EMPLOYERS, whom we have permission to contact.

| Name | Occupation | Address | Phone # |
|------|------------|---------|---------|
| | | | |
| | | | |
| | | | |

Additional Information

Please summarize other experiences, skills or qualifications, which you feel would qualify you for the position(s) for which you have applied.

Applicant's Agreement Read carefully before signing

I certify that I have read and understand the information on this application and that the answers given by me to the questions and the statements made by me are complete and true to the best of my knowledge and belief.

I understand that any false information, omission or misrepresentations of fact called for in this application may result in rejection of my application or immediate discharge at any time during my employment.

I understand that, as a condition of initial or continued employment, I agree to submit to examinations that may be lawfully required by the County, such as medical examinations or substance abuse testing.

I authorize the County and/or its agents, including consumer reporting bureaus to verify any of this information by searching appropriate information and record sources. I authorize all employers (unless restricted below), persons, schools, companies, law enforcement authorities and state agencies to release any information concerning my background and hereby release those parties from any liability for any damage whatsoever for issuing this information.

Employers we may **NOT** contact for a reference: _____

I understand and agree that, as a condition of employment, I shall meet and maintain all required standard of my position which involve certification and training.

Signature of Applicant: _____ **Date:** _____