LATIMER COUNTY

Employment Application

NOTICE TO ALL APPLICANTS: It is the policy of Latimer County to provide equal opportunities for employment, retention, transfer and reassignment, advancement and rehire of all persons regardless of age, race, color, creed, national origin, political affiliation, religion, physical/mental disability, or gender. Latimer County is a drug-free workplace. In addition all Latimer County Employees are subject to random drug testing.

Date: _____

APPLICANT INFORMATION

Last Name First M.I. Date

Street Address Apartment/Unit #

City State ZIP

Phone E-mail Address

Date Available Desired Salary

Do you have a valid Driver License in this state: YES NO

District No# if applicable: _____

Position applying for: Laborer General Office

Truck Driver Other _____

Janitorial

Mechanic

Equipment Operator

CDL information: Do you currently have CDL verification: _____

Are you a citizen of the United States?	YES	NO	If no, are you authorized to work in the U.S.?	YES	NO
Have you ever worked for Latimer County in the past?	YES	NO	If so, when?		
Have you ever been convicted of a felony?	YES	NO	If yes, explain		

EDUCATION

School Attended: Address

Dates attended From: To: Did you graduate? YES NO Degree

School Attended: Address

Dates attended From: To: Did you graduate? YES NO Degree

School Attended: Address

Dates attended From: To: Did you graduate? YES NO Degree

REFERENCES

Please list three professional references.

1. Full Name Relationship

Company Phone

Address

2. Full Name Relationship

Company Phone

Address

3. Full Name Relationship

Company Phone

Address

PREVIOUS EMPLOYMENT

Company Phone

Address Supervisor

Job Title Starting Salary $ Ending Salary $

Responsibilities

From To Reason for Leaving

May we contact your previous supervisor for a reference? YES NO

Company Phone

Address Supervisor

Job Title Starting Salary $ Ending Salary $

Responsibilities

From To Reason for Leaving

May we contact your previous supervisor for a reference? YES NO

Company Phone

Address Supervisor

Job Title Starting Salary $ Ending Salary $

Responsibilities

From To Reason for Leaving

May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE

Branch

From To

Rank at Discharge

Type of Discharge

If other than honorable, explain

DISCLAIMER AND SIGNATURE

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 statements 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 all my former employers, schools officials and person names as references, if I have marked above in the application to do so.

I understand that as this County deems necessary, I may be required to work overtime hours or hours outside a normally defined work day or work week. 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 liability to me for any continuation of salary, wages, or employment related benefits (not required by law).

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

The filling out and returning of this application to the County does not guarantee employment and does not constitute an offer of employment.

Signature

Date

**If you would like to provide a resume you may do so and attach it to the last page of this application.