

APPLICATION FOR EMPLOYMENT AN EQUAL OPPORTUNITY EMPLOYER

(Please print all information)

PERSONAL INFORMATION			
DATE OF APPLICATION:			
Name:Last	First		Middle
Last	THSt		Middle
Address:Street	Box	City/State	Zip
Contact Information: () Home Telep) ell Phone	Email
Social Security #:(optional)	D	river's License #:	State:
Are you at least 18 years old?	YesNo		
If you answered yes, please explain. (Note: A conviction record will not necessar will be considered in relation to the nature as	ily disqualify and applic	ant from employment. Th	
Are you a citizen of the United State YES NO	es, or specifically au	thorized to be employ	red in the United States?
(Note: The law requires that you provide evhired. Any offer of employment which you we request from you.)			
Have you ever served in the U.S. Mi If yes, please answer the following of	-	(circle one)	
Have you obtained any special skills applicable in the job for which you have			
If yes, please describe:			

PRIOR EMPLOYMENT
(List your last four jobs, beginning with the most recent-omit dates for jobs held more than five years)

1. Employer name/address/phone	
Job title:	
Duties:	
Dates employed:	
Reason for leaving:	
2. Employer name/address/phone	
Job title:	
Duties:	
Dates employed:	
Reason for leaving:	
3. Employer name/address/phone	
Job title:	
Duties:	
Dates employed:	
Reason for leaving:	
4. Employer name/address/phone	
Job title:	
Duties:	
Dates employed:	
Reason for leaving:	

POSITION INFORMATION Position Applying for: How did you hear about this job? _____ What hours are you willing to work? Would you be able to work weekends? Are you willing to travel for the job? Do you have a relative employed by this department? Yes No If the answer is yes, please list the name(s)._____ Are you currently employed: May we contact your present employer? Available Start Date: _____ Desired Salary: ______ per _____ EMPLOYMENT AND TRAINING Graduate?-Degree? Major/Subjects of Study Name/Location High School College or University Specialized Training, Trade School, Etc. Other Education Other Skills Describe any computer, office machine, or equipment skills and proficiency level: Describe any special skills or qualifications (Microsoft Word, Lotus, Etc.) which may help you in the position applied for:

REFERENCES

Name:		
Occupation:		
Address:		
Telephone:		
Name:		
Occupation:		
Address:		
Telephone:		
Name:		
Occupation:		
Address:		
Telephone:		
·	hisleading, or incomplete responses may result in disqualification for hire or impulsion dismissal from employment. You may add additional pages if necessary. AD THIS SECTION BEFORE YOU SIGN THIS EMPLOYMENT APPLICATION.	
understand application p obligated to offe understand the employed I w dismissal. I und for no defin employment m application signed by the ability to provi	answers given in this application are true and complete to the best of my knowled that any false statements on this application could result in disqualification from process or if employed, separation from the Company. I understand the employed er the position to me, even after completing this application or following a job in a Company has certain rules and procedures, which must be followed. I agree the will follow the rules of the Company or be subject to disciplinary action that could erstand Lane County is an at-will employer, which means that any term of employed the period of time regardless of the date or payment of wages. If I am employed that are ended with or without cause or notice. No verbal agreements made do or interview process can be relied upon unless such agreements are in writing Department Head. I understand that if I am hired, my employment is conditioned to the proof of work authorization and identity as required by Federal Law on the first ment and the completion of any post-employment requirements of the employer.	n the r is not nterview. I at if I am d mean oyment is l, such uring any ng and al on my rst day of
Signature:	Date:	