



# Neosho County Employment Application

## Applicant Information

Position(s) Applied for: \_\_\_\_\_

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Driver's License State: \_\_\_\_\_ D.L. #: \_\_\_\_\_ Class of License: \_\_\_\_\_

Date Available: \_\_\_\_\_ Desired Salary: \_\_\_\_\_

Are you a citizen of the United States?  Yes  No      Have you ever worked for Neosho County?  Yes  No

If no, are you authorized to work in the U.S.?  Yes  No      If yes, when? \_\_\_\_\_

Have you ever been convicted of a felony?  Yes  No      Are you at least 18 years of age?  Yes  No

If yes, explain: \_\_\_\_\_

## Education

	Name & Address of School	Last year completed (Circle)	Did you Graduate?		Diploma or Degree
High School		9 10 11 12	Yes	No	
Business/Technical		1 2 3 4	Yes	No	
College/University		1 2 3 4	Yes	No	
Graduate School		1 2 3 4	Yes	No	
Other		1 2 3 4	Yes	No	

## Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_



# Neosho County Employment Application

## 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



# Neosho County Employment Application

## References

Name	Telephone	Relationship	Years

## Certification

*I certify that all statements made by me on this application are true and complete to the best of my knowledge and that I have withheld nothing which, if disclosed, would affect this application unfavorably.*

*I authorize my previous employers and schools to release any information regarding employment or educational records. I agree that this organization and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn or my employment is terminated because of false statements, omissions or answers made by me on this application. In the event of my employment with this organization, I will comply with all rules and regulations set forth in any communication made available to employees.*

*In compliance with the Immigration Reform and Control Act of 1986, I understand that I will be required to provide approved documentation that verifies my right to work in the United States on my first day of employment.*

*I acknowledge that I have been given a copy of the job description for the position for which I am applying and that I am able to perform the essential functions of the job, with or without reasonable accommodation.*

*I further understand and agree that my employment is for no definite period of time and may be terminated at any time, with or without cause, with or without notice, at the option of either the county or myself.*

*I understand this application is active for only 180 days. If I have not heard from anyone concerning employment and still wish to be considered for employment after that time, it will be necessary to fill out a new application form.*

**Neosho County is an Equal Opportunity Employer. We do not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicants' consideration for employment on a basis prohibited by local, state or federal law.**

*Please feel free to attach a resume or other information you feel would be helpful in evaluating your qualifications.*

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## Neosho County – Do Not Write Below

Interview:	Yes/No	Interviewed By:		
Date of Interview:		Time:		
Acceptable for Employment:				
Date of Application:				
Date Application reaches 6 months:				