



Crittenden County Fiscal Court
Application for Employment

Date of Application: _____

Date of Availability: _____

PERSONAL INFORMATION

Applicant Name (Last, First, Middle Initial) _____

Social Security Number _____

Maiden / Alias Name in which you have been employed _____

Phone Number _____

Mailing Address _____

City _____

State _____

Zip Cod _____

EMPLOYMENT DESIRED

	Department / Type of Work Desired	Shift	Rate of Pay	Status
First Choice:	_____	_____	_____	FT/PT
Second Choice:	_____	_____	_____	FT/PT

Are you 18 years of age or older? Yes No

Are you currently employed? Yes No

May we contact your current employer? Yes No How did you hear of this opening? _____

EDUCATION

Circle the Highest Grade Completed 8 9 10 11 12 Did you obtain a High School Diploma or GED?

High School Name _____ City, State _____ Degree / Area of Study _____ Yes No Completed?

College Name _____ City, State _____ Degree / Area of Study _____ Yes No Completed?

Vocational/Business School Name _____ City, State _____ Degree / Area of Study _____ Yes No Completed?

Professional Educational Name _____ City, State _____ Degree / Area of Study _____ Yes No Completed?

Extracurricular Activities: _____

Member of Professional Organization: _____

Honors Received, Volunteer/Community Service or Other qualifications related to position in which you are applying:

Were you in the US Armed Forces? Yes No If yes, what Branch? _____

Duties of Duty: From: _____ / _____ / _____ To _____ / _____ / _____ Rank at Discharge: _____
Month Day Year Month Day Year

PROFESSIONAL LICENSES AND/OR CERTIFICATIONS

Type / Certificate Name	Organization / State Issued	Date Issued	Number
Type / Certificate Name	Organization / State Issued	Date Issued	Number

EMPLOYMENT HISTORY (current listed first)

Employer / Company Name	Supervisor Name
Address / City / State	Phone Number
Dates of Employment	Job Responsibilities
Employer / Company Name	Supervisor Name
Address / City / State	Phone Number
Dates of Employment	Job Responsibilities
Employer / Company Name	Supervisor Name
Address / City / State	Phone Number
Dates of Employment	Job Responsibilities
Employer / Company Name	Supervisor Name
Address / City / State	Phone Number
Dates of Employment	Job Responsibilities
Employer / Company Name	Supervisor Name
Address / City / State	Phone Number
Dates of Employment	Job Responsibilities

Have you ever been convicted of a crime? Yes No

If Yes, When, Where, and Why? _____

Conviction of a criminal offense will not necessarily preclude your employment.

REFERENCES

Use this space to give us further information which will assist us in placing you.

Provide at least two personal references not related to you, whom you have known for at least one year.

Name	How do they know you?	Phone Number
Name	How do they know you?	Phone Number
Name	How do they know you?	Phone Number

AVAILABILITY RECORD

I am available to work: *(mark all that apply)*

- Monday
 Tuesday
 Wednesday
 Thursday
 Friday
 Saturday
 Sunday
 Day Shift
 Evening Shift
 Night Shift
 Holidays

Do you limit your annual earnings due to Social Security or other reason? Yes No

I understand that emergency conditions may require me to temporarily work shifts other than normally scheduled and agree to such scheduling change as directed by my department head or administrator.

Applicant's Signature

Date

EMPLOYMENT UNDERSTANDING (Please read and sign)

Crittenden County Fiscal Court and departments within do not discriminate in hiring or any other decision on the basis of race, color, sex, citizenships, national origin, ancestry, Vietnam era Veterans status, or on the basis of age or physical or mental disability unrelated to ability to perform the work required. No question on this application is intended to secure information to be used for such discrimination.

I voluntarily give Crittenden County Fiscal Court and departments within, the right to make a thorough investigation of my past employment and activities, agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying such information. I further understand that Crittenden County Fiscal Court is a Drug Free Workplace and consent to take a pre-employment drug screen, and future random screenings as may be required by Crittenden County Fiscal Court at such times and places as designated. I understand that an offer of employment may be contingent on results of screening.

I understand that my employment is at will, and that either party is free to terminate the employment relationship at any time without cause. I also understand that my employment may be terminated for any misstatement or omission of fact appearing on this application form.

If employed, I will be required to complete an Employment Verification (I-9) and within three days show satisfactory evidence of identity and eligibility for employment.

Applicant's Signature

Date