

# MILLS COUNTY APPLICATION FOR EMPLOYMENT

Equal access to programs services and employment is open to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resource Department.

Position applied for: \_\_\_\_\_ Date of Application: \_\_\_\_\_

**PLEASE PRINT**

NAME \_\_\_\_\_  
Last Name
First Name
Middle

Address \_\_\_\_\_ Social Security # \_\_\_\_\_  
STREET
CITY
STATE
ZIP

Telephone # ( ) \_\_\_\_\_ Other phone # ( ) \_\_\_\_\_ Email address \_\_\_\_\_

If necessary, best time to call at home ..... AM PM

Can you be contacted at work?..... YES NO

If YES, work number ( ) \_\_\_\_\_ and best time to call \_\_\_\_\_ AM to \_\_\_\_\_ PM

Have you ever been employed here before? ..... YES NO

If yes, please provide the dates.....From \_\_\_ / \_\_\_ / \_\_\_ to \_\_\_ / \_\_\_ / \_\_\_.

Are you legally eligible for employment in this county?..... YES NO

Date available for work..... \_\_\_ / \_\_\_ / \_\_\_.

Type of employment desired \_\_\_\_\_ Full-Time \_\_\_\_\_ Part-Time \_\_\_\_\_ Temporary

Are you able to meet the attendance requirements of the position?..... YES NO

Will you work overtime if required?..... YES NO

Have you ever plead "guilty" or "no contest" to, or been convicted of a crime?..... YES NO

If yes, please explain \_\_\_\_\_

\*Answering yes to these questions does not constitute an automatic bar to employment. Factors such as date of the offense, seriousness and nature of the violation, rehabilitation and position applied for will be taken into account.

Driver's license number if driving is an essential job function \_\_\_\_\_ State \_\_\_\_\_

**EDUCATIONAL BACKGROUND:**

Circle the highest degree attained: GED                  HS                  AA                  BA                  MA                  \_\_\_\_\_

Name of High School and Location: \_\_\_\_\_

Name of College and Location: \_\_\_\_\_

Please list any other school(s) and their location(s): \_\_\_\_\_

**EMPLOYMENT HISTORY:** Starting with your recent/current employer, provide the following information:

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Dates Employed: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Starting job title/Final job title: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer:                  YES                  NO

**EMPLOYMENT HISTORY:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Dates Employed: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Starting job title/Final job title: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer:                  YES                  NO

**EMPLOYMENT HISTORY:** (continued)

**EMPLOYMENT HISTORY:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone # ( ) \_\_\_\_\_

Dates Employed: \_\_\_\_\_ Ending Salary: \_\_\_\_\_

Starting job title/Final job title: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Description of Duties: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

May we contact this employer:                      YES      NO

**Comments** INCLUDING EXPLANATION OF ANY BREAKS IN EMPLOYMENT \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Skills and Qualifications:** Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying. Please indicate computer software you are familiar with.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REFERENCES:** Please list three business/work references who are NOT related to you and are NOT previous supervisors.

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

Relationship to candidate: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Years known: \_\_\_\_\_

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

Relationship to candidate: \_\_\_\_\_ Title: \_\_\_\_\_

Phone Number: ( ) \_\_\_\_\_ Years known: \_\_\_\_\_

REFERENCES: (continued)

Name: _____
Relationship to candidate: _____ Title: _____
Phone Number: ( ) _____ Years known: _____

List any additional information you would like us to consider:

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I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the employer's service, whenever it is discovered. I give the employer the right to contact and obtain information from all references, employers, educational institutions and to otherwise verify the accuracy of the information contained in this application, resume or job interview. I hereby release from liability the employer and its representatives for seeking, gathering and using such information and all other persons, corporations or organizations for furnishing such information.

If I am hired, I understand that this application does not constitute an agreement or contract for employment for any specified period of time. I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

I understand it is the employer's policy not to refuse to hire a qualified individual with a disability because of that person's need for a reasonable accommodation as required by ADA. The employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state or federal law.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I represent that I have read and fully understand the foregoing and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_