Application for Employment - Bourbon County, KS

Equal access to programs, services and employment opportunities is available to all persons without regard to sex (including pregnancy), race, color, religion, national origin, citizenship, age, disability, genetic information, or any other basis protected by federal, state, and/or local law.

In accordance with the Americans with Disability Act and/or applicable state and local laws, applicants requiring reasonable accommodations for the application and/or interview process should notify the Human Resources Department. Examples of reasonable accommodations include making a change to the application process; providing written materials in an alternate format such as braille, large print, or audio recording; using a sign language interpreter; using specialized equipment; or modifying testing conditions.

Name		
Last	First	Middle
Address		
Street	City	State Zip Code
Telephone # Ce	llphone #	Email
Position(s) applied for		Date of Application
Have you applied with us before?	Yes No	Are you able to meet the attendance and essential functions of the job requirements of the job for which you are applying? Yes No
Have you ever been employed here before?	Yes No	
If yes, give dates of employment: Are you lawfully authorized to work in the U		(This question is not designed to elicit information about an applicant's disability. Please do not provide information about the existence of a disability particular accommodation or whether accommodation is necessary. These issues may be addressed at a later stage to the extent permitted by law.)
Date available to work:	Yes No	Driver's license number:State
		Have you ever been bonded? Yes No
What is your desired salary range or hourly r		Have you entered into an agreement with any former employer or other party that might, in any way, restrict your ability to work for our company? Yes No
Type of employment desired: Full-Time Seasonal	Part-Time Temporary	If yes, please explain:
Will you relocate if job requires it?	Yes No	
Will you travel if job requires it?	Yes No	

Employment History

Starting with your most recent employer, provide the following information. You may include any verified work performed on a volunteer basis.

Employer			Telephone#			
AddressStreet	City			Zip Code		
Starting Job Title/Final Job Title	•		Supervisor	•		
Dates Employed:	·	May we contac	t for reference:		Yes	No
Summarize the type of work performed and job responsibilities	S					
Reason for leaving employment						
What did you like most about your position?						
What did you like least about your position?						
Employer			Telephone#			
			тетернопе#			
AddressStreet	City	State		Zip Code		
Starting Job Title/Final Job Title			Supervisor			
Dates Employed:	-	May we contac	t for reference:		Yes	No
Summarize the type of work performed and job responsibilities	s					
Reason for leaving employment						
What did you like most about your position?						
What did you like least about your position?						
Employer			Telephone#			
AddressStreet	City	State		Zip Code		
Starting Job Title/Final Job Title	•		Supervisor	· · · · · ·		
Dates Employed:	·	May we contac	t for reference:		Yes	No
Summarize the type of work performed and job responsibilities	s					
Reason for leaving employment						
What did you like most about your position?						
What did you like least about your position?						

Employment History (Continued) Telephone# _____ Employer Address Zip Code Starting Job Title/Final Job Title_____ Supervisor_ Dates Employed: _____ May we contact for reference: Yes No Summarize the type of work performed and job responsibilities Reason for leaving employment What did you like most about your position? What did you like least about your position? Please explain gaps in your employment, other than those due to personal illness, injury, or disability. Have you ever been fired or asked to resign from a job? Yes If yes, please explain No **Skills & Qualifications** Please summarize any special training skills, languages, licenses, and/or certificates that may assist you in performing the position for which you are applying. (Include software titles and level of experience, such as basic, intermediate, or advanced.)

Related Information When answering these questions, please exclude an information that would reveal sex, race, color, religion, national origin, citizenship, age, disability, genetic information, or other similarly protected status.

What job-related organizations do you belong? ______

	origin, citizenship, age, disability, genetic information, or other similarly protected status.
Lis	st special accomplishments, publications, awards, etc
Lis	st any relevant volunteer work performed
Lis	st any other job-related information you would like to share with us
	Educational Background

Institution	# Of Years Completed	Completed			GPA	Major/Minor
		Diploma Certification	GED Other	Degree 		
		Diploma Certification	GED Other	Degree		
		Diploma Certification	GED Other	Degree 		
		Diploma Certification	GED Other	Degree 		

References

Name	Title	Relationship to You	Telephone number	Email Address	# Of Year Known

Applicant Statement

I certify that all information I have provided to apply for and secure work with this employer is true, complete, and correct. I expressly authorize, without reservation, the employer, its representatives, employees, or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume', or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees, or representatives, for seeking gathering, and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations, or organizations for furnishing such information about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on any basis prohibited by applicable local, state, or federal law.

I understand that this application remains current for only 60 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 for me to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's representative.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an 1-9 Form in this regard.

I understand that reasonable safeguards will be taken to protect all personal information provided or obtained in conjunction with this application for employment.

My personal information may be shared with the employer's affiliate(s) and third parties engaged by the employer to perform services for the employer. Any personal information shared with an affiliate, or third party is to be used solely to perform the services requested by the employer.

Bourbon County does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex (including pregnancy), race, color, religion, national origin, citizenship, age, disability, genetic information, or any other protected status under applicable federal, state, or local law.

Mandatory Employer Disclosures

I understand that any information provided by me that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment.

I certify that I have read, fully understand, and accept all terms of the foregoing applicant statement.				
Signature of Applicant	Date			

Bourbon County – Authorization to Release Information

Authorization to Release Information

I hereby authorize you to furnish any authorized representative of Bourbon County bearing this release, within one year of its date, and personal record to include my driving record or criminal record that is deemed of a private of confidential nature. I hereby direct you to release this information upon request of the bearer. This release is executed with full knowledge and understanding that the information is for the official use of Bourbon County and will be considered as part of their pre-employment background investigation in determining my qualifications and fitness for the position which I seek.

Consent is granted for Bourbon County to furnish the information described above to third parties while fulfilling its official responsibilities. I further understand that I waive any right or opportunity to read or review any information provided to Bourbon County pursuant to this request, as well as any information contained in my driving history.

I hereby release you and all related agents and representatives, both individually and collectively, from any and all liability for damages of whatever kind. Should there be any questions as to the validity of this release, you may contact me as indicated below.

A photocopy or facsimile of this form will be valid as an original thereof, even though the photocopy does not contain an original writing of my signature. You may retain this form in your files.

Applicants Full Name		Date
Address		
Date of Birth	Driver's License #	Issue State
Social Security #	Telephone #	
Signature	e of Applicant	