

**BOONE COUNTY GOVERNMENT**

**Application for Employment**

*Boone County Government is an Equal Opportunity Employer and adheres to the principles and practices outlined in applicable federal, state, and local laws and regulations that prohibit discrimination in employment and hiring. It is the policy and practice of the County to hire, train, promote, compensate, and administer all employment practices without regard to race, color, ancestry, national origin, religion, age, sex, sexual orientation, veteran status, medical condition, pregnancy, or physical or mental disabilities unrelated to the ability to perform essential job functions with or without reasonable accommodations.*

**PLEASE PRINT CLEARLY**

Date of Application \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Referral Source:

Website

Newspaper

Friend/Relative

Employment Agency

Walk-In

Name \_\_\_\_\_

Last

First

Middle

Address \_\_\_\_\_

Number/Street

City

State

Zip Code

Telephone Number \_\_\_\_\_

Email Address \_\_\_\_\_

If you are under 18, can you furnish a Work Permit?	YES	NO
Have you submitted an application to the County before?	YES	NO
Have you been previously employed by Boone County?	YES	NO
Are you employed now?	YES	NO
If you are employed, may we contact your current employer?	YES	NO
Are you legally authorized to work in the United States?	YES	NO

On what date would you be available for work? \_\_\_\_\_

Are you available to work:

Full-Time

Part-Time

Temporary

Seasonal

Shift

Are you on a lay-off and subject to recall?	YES	NO
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Can you travel if the job requires it?	YES	NO
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Are you a Veteran of the U.S. Military Service?	YES	NO
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Are you fluent in any foreign language(s)? If so, please list the language(s) and whether you are able to speak, read, and/or write.

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List professional, trade, business, or community/civic activities and offices held.

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## PERSONAL REFERENCES

Provide the name, address, and telephone number for three personal references who are not related to you and are not former employers.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## EMPLOYMENT EXPERIENCE

Begin with current or most recent employment. Include military service and volunteer activities.

EMPLOYER	DATES EMPLOYED	WORK PERFORMED
ADDRESS		
JOB TITLE		
SUPERVISOR CONTACT INFORMATION		

EMPLOYER	DATES EMPLOYED	WORK PERFORMED
ADDRESS		
JOB TITLE		
SUPERVISOR CONTACT INFORMATION		

## EMPLOYMENT EXPERIENCE (CONTINUED)

EMPLOYER	DATES EMPLOYED	WORK PERFORMED
ADDRESS		
JOB TITLE		
SUPERVISOR CONTACT INFORMATION		

EMPLOYER	DATES EMPLOYED	WORK PERFORMED
ADDRESS		
JOB TITLE		
SUPERVISOR CONTACT INFORMATION		

EMPLOYER	DATES EMPLOYED	WORK PERFORMED
ADDRESS		
JOB TITLE		
SUPERVISOR CONTACT INFORMATION		



## AGREEMENT

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions or misrepresentations are discovered, my application may be rejected.

I authorize Boone County to make inquiries to my character, employment record and other matters to verify my employment and release to Boone County. I further understand that such inquiries will include checking police records for convictions. I understand that I may request reasonable accommodations, if needed, due to disability, in order to participate in the overall application process.

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.

I understand that prior to being offered employment with Boone County; I may be requested to take an employment examination. In the event I have a disability, which will affect my ability to take the test, I will so inform Boone County prior to the administration of that test so that a reasonable accommodation can be made. Boone County reserves the right to require medical documentation concerning the need for the accommodation.

If hired, I agree to comply with all current and future rules, regulations and employment policies of Boone County and understand that all rules, regulations and policies relating to conditions of employment are subject to modification by Boone County without notice.

I understand that this application will be kept on active file for at least thirty (30) days from the date completed, after which time I may have to reapply in accordance with the established County procedures.

I understand that I am not obligated to disclose criminal history information ordered expunged, sealed or impounded.

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Signature of Applicant

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Date