

MERCER COUNTY
AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

PAGE 1 OF 6

Instructions: Please complete this form completely and accurately. Please use a pen and print clearly.

SECTION I - PERSONAL INFORMATION

Name: _____
Last First MI Social Security #

Street Address City State County Zip Code

Home Telephone # _____

Work Telephone # _____

Are you at least eighteen (18) years of age? Yes No

Are you prevented from lawfully becoming employed by this County because of VISA or Immigration Status? Yes No

Proof of citizenship or immigration status will be required upon employment.

Best Time to contact you by phone at: Home _____ Work _____

SECTION II - WORK PREFERENCES

Position(s) applied for _____

Date of Application _____

Are you applying for: Full-time work Part-time work No preference

Are you interested in:

Permanent work Intermittent work Temporary work
 Seasonal work No preference

Are you currently on "lay-off" status and subject to recall? Yes No

Minimum salary expectation: _____ Date available to start: _____

MERCER COUNTY
AN EQUAL OPPORTUNITY EMPLOYER

SECTION III - WORK REFERENCES

Employment History Including Military Service If Applicable (In chronological order beginning with the most recent):

<p>1.</p> <p>_____ Employer's Name</p> <p>_____ Street Address</p> <p>_____ City/State/Zip</p> <p>_____ Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____ Month/Year</p> <p>To: _____ Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary:</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc. for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p> <p>_____</p> <p>_____</p>		

<p>2.</p> <p>_____ Employer's Name</p> <p>_____ Street Address</p> <p>_____ City/State/Zip</p> <p>_____ Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____ Month/Year</p> <p>To: _____ Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary:</p> <p>Beginning: _____</p> <p>End: _____</p>
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Describe your duties, responsibilities, equipment operated, etc. for position(s) held:

Describe your reason(s) for leaving:

3.

Employer's Name

Street Address

City/State/Zip

Supervisor's Name

Dates Employed:

From: _____
Month/Year

To: _____
Month/Year

Your Job Title:

Beginning: _____

End: _____

Your Salary:

Beginning: _____

End: _____

Describe your duties, responsibilities, equipment operated, etc. for position(s) held:

Describe your reason(s) for leaving:

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<p>4.</p> <p>_____ Employer's Name</p> <p>_____ Street Address</p> <p>_____ City/State/Zip</p> <p>_____ Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____ Month/Year</p> <p>To: _____ Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary:</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc. for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p> <p>_____</p> <p>_____</p>		

<p>5.</p> <p>_____ Employer's Name</p> <p>_____ Street Address</p> <p>_____ City/State/Zip</p> <p>_____ Supervisor's Name</p>	<p>Dates Employed:</p> <p>From: _____ Month/Year</p> <p>To: _____ Month/Year</p>	<p>Your Job Title:</p> <p>Beginning: _____</p> <p>End: _____</p> <p>Your Salary:</p> <p>Beginning: _____</p> <p>End: _____</p>
<p>Describe your duties, responsibilities, equipment operated, etc. for position(s) held:</p> <p>_____</p> <p>_____</p>		
<p>Describe your reason(s) for leaving:</p> <p>_____</p> <p>_____</p>		

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APPLICATION FOR EMPLOYMENT

PAGE 5 OF 6

SECTION IV - EDUCATION AND TRAINING

	Formal Education	College	Technical School
School Name and Location			
Years Completed	1 2 3 4 5 6 7 8 9 10 11 12	1 2 3 4 5 Above	1 2 3 4 Above
Diploma/Degree/Major			
Other School(s) attended:			
Please describe the courses you took, technical training you received, or skills you have attained which you feel would help you perform the job for which you are applying (e.g., special machines or equipment you operate, hobbies or volunteer work projects which have taught you qualifying skills, etc.):			

SECTION V - MISCELLANEOUS

(The following information will be used only if it is directly related to the classification/position for which you are applying)

Have you ever been employed in the state or county service of the state of Ohio? Yes No

Have you any job-related training in the U.S. Military? Yes No

MERCER COUNTY
AN EQUAL OPPORTUNITY EMPLOYER

APPLICATION FOR EMPLOYMENT

PAGE 6 OF 6

Have you ever been convicted of a felony? Yes No
(Conviction will not necessarily disqualify an applicant)

If you answered Yes to either of the last two questions, please explain:

Have you ever filed an application here before? Yes No

Have you ever been employed here before? Yes No

References (Please give the name, address, and phone number of three references not related to you who would know of your skills for this position):

<hr/> Name	<hr/> Address	<hr/> Phone
<hr/> Name	<hr/> Address	<hr/> Phone
<hr/> Name	<hr/> Address	<hr/> Phone

I hereby declare that the information provided by me in this application for employment is true, correct, and complete to the best of my knowledge. I understand that, if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

I authorize you to obtain information through contacts with my former employers and references listed above.

Applicant's Signature

Date