

APPLICATION FOR EMPLOYMENT

We consider applications for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, sexual orientation, citizenship status, genetic information, or any other legally protected status.

Please print in black or blue ink.

Position Applied For:	Application Date:
How did you learn about us?	

Last Name:	First Name:	Middle Name:
Address: Number: Street: City: State: Zip Code:		
Phone Number:	Social Security Number:	Date of Birth:

Best time to be contacted?	
If you are under 18 years of age, can you provide required proof of your eligibility to work?	
Have you ever filed an application with us before?	
If yes, please provide date.	
Have you ever been employed with Colfax County?	
If yes, please provide dates.	
Do you currently have friend or family working for Colfax County?	
Are you currently Employed?	
May we contact your present employer?	
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?	
Note: Proof of citizenship or immigration status will be required upon employment.	
Date Available to start work?	
What is your desired salary range?	
Which of the following are you available to work? Full-Time: (please indicate 1 2 3 shift) Part-Time: (please indicate morning, afternoon, or evening) Temporary: (Pease indicate date range available)	
Are you currently on "lay-off" status and subject to recall?	
Can you travel if a job requires it?	

Education:

	Name & Address of School	Course of Study	Number of years completed	Diploma or Degree
Elementary School				
High School				
Undergraduate College				
Graduate Professional				
Other				

Describe any specialized training, apprenticeship, skills, and extracurricular activities.

Describe any job-related training received in the United States military, employment, or other experience.

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

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status.

Please state any additional information you feel may be helpful to us in considering your application.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities, or other protected status.

Employer:		Dates Employed	Work Performed
Address:		From:	
Phone:		To:	
Job Title:	Supervisor:	Hourly Salary	
Reason for leaving:		Start:	
		End:	

Employer:		Dates Employed	Work Performed
Address:		From:	
Phone:		To:	
Job Title:	Supervisor:	Hourly Salary	
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Employer:		Dates Employed	Work Performed
Address:		From:	
Phone:		To:	
Job Title:	Supervisor:	Hourly Salary	
Reason for leaving:		Start:	
		End:	

References

Please provide Name, Phone number, and relationship

Name	Phone	Relation

Applicant's Statement

I certify that answers given are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time should inquire as to whether applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date