

APPLICATION FOR EMPLOYMENT

MASON COUNTY FISCAL COURT

Equal access to programs, services, and employment is available to all persons. Those applicants requiring reasonable accommodations to the application and/or interview process should notify the Mason County Judge/Executive.

Please print.

Position(s) Applied for: _____ Department: _____

Name: _____ Phone: _____

Address: _____

City: _____ State _____ Zip _____

Have you ever been employed by the County before? Yes No

If yes: Date(s) _____ Department: _____

Type of Employment Desired Full-time Part-time Seasonal Education Co-op

Have you ever been convicted of a crime in the last seven (7) years? Yes No

If yes, please explain: _____

List your last four (4) employers, beginning with the most recent.

Employer:	Employer Address:	Employer Phone:
Position Held:	From: To:	Reason for Leaving:

Employer:	Employer Address:	Employer Phone:
Position Held:	From: To:	Reason for Leaving:

Employer:	Employer Address:	Employer Phone:
Position Held:	From: To:	Reason for Leaving:

Employer:	Employer Address:	Employer Phone:
Position Held:	From: To:	Reason for Leaving:

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EDUCATION

___ High School Diploma ___ GED ___ Associates Degree
___ Bachelor's Degree ___ Master's Degree ___ Other _____

Do you have a C.D.L.? ___ Yes ___ No If yes, Class:

REFERENCES

Table with 3 columns: Name, Address, Phone Number. Three empty rows for reference information.

I hereby declare the information provided herein by me 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 cause for dismissal. I understand that this information will be kept on file for a period of one (1) year.

Signature of Applicant: _____ Date: _____

Mason County Fiscal Court is an Equal Opportunity Employer
Mason County fiscal Court does not discriminate against any person in the provision of service or any other matter on the grounds of age, race, color, creed, religion, sex, national origin, disability or familial status.

FOR OFFICE USE ONLY:

Selected for interview: ___ Yes ___ No

Interview Date: _____ Interviewed By: _____

Hire Date: _____ Start Date: _____