**APPLICATION FOR EMPLOYMENT**

**Warren County, Missouri**

In compliance with Federal and State equal employment opportunity laws, qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital status, handicap or other status protected by law.

**Answer all questions. Please print.** Date of application\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION I GENERAL INFORMATION (to be completed by ALL applicants)**

Position(s) Applied for: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Position: Full time \_\_\_\_\_\_\_ Part time \_\_\_\_\_\_\_ If part time, hours \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date available for employment \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Length of notice required \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Street Address City State Zip

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Best time to call \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you currently employed? \_\_\_\_\_\_\_\_\_\_ If not, how long since leaving last employment? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rate of pay expected? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Who referred you? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you worked for this or any other County or public employer before? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If so, provide additional information:

Where \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dates employed: From \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ To \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rate of Pay \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for leaving \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What experience, training, or education have you had which will help you in the position(s) for which you are applying? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List special equipment or other technical expertise you may have. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever pled guilty or ‘no contest’ to a crime or been convicted of a crime? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, please give date and details of each: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been terminated or asked to resign from any job? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If yes, please describe the circumstances: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you prevented from lawfully becoming employed in the United States due to your visa or immigration status? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Can you provide documented proof of your eligibility for employment in the United States? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION II EDUCATION (to be completed by ALL applicants)**

Circle Highest Grade Completed:

1 2 3 4 5 6 7 8 High School: 1 2 3 4

College Education? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ If so, number of years completed? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Last School Attended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name City/State

Describe course of study: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other type of post-secondary education or training? \_\_\_\_\_\_\_\_\_\_\_\_ If so, number of years? \_\_\_\_\_\_\_\_\_\_

Where? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Name City/State

**ADDITIONAL INFORMATION (to be completed by ALL applicants)**

Why do you want to become an employee of Warren County? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State any additional information you feel may be helpful to us in considering your application. \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Summarize special job-related skills and/or qualifications from previous employment or other experience.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION III EMPLOYMENT HISTORY (to be completed by applicants for non-driving positions)**

This section is for non-driving positions only. If you are applying for a position in which you may drive, please skip this section and move on to Section IV.

List employers in reverse order, starting with the most recent.

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

**SECTION IV EMPLOYMENT HISTORY FOR *DRIVING POSITION APPLICANTS ONLY***

Can you legally obtain/maintain a drivers license issued by the state of Missouri? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This section must be fully completed by all applicants for driving positions. All driver applicants must provide the following information on all employers during the preceding 3 years.

List employers in reverse order, starting with the most recent.

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

|  |  |
| --- | --- |
| **EMPLOYER DETAILS** | **POSITION HELD/JOB TITLE** |
| NAME |
| ADDRESS |
| CITY/STATE/ZIP | **DATES EMPLOYED**FROM TO |
| PHONE # |
| SUPERVISOR NAME/TITLE |
| REASON FOR LEAVING |

**SECTION IV CONTINUED EMPLOYMENT HISTORY FOR *DRIVING POSITION APPLICANTS ONLY***

|  |
| --- |
| **ACCIDENT RECORD FOR PAST 3 YEARS OR MORE, IN REVERSE ORDER, STARTING WITH MOST RECENT.** **ATTACH ADDITIONAL SHEET IF MORE SPACE IS NEEDED.** **DATES NATURE OF ACCIDENT (HEAD-ON, REAR-END, ETC.) FATALITIES INJURIES** |
| **MOST RECENT ACCIDENT** |  |  |  |
| **NEXT PREVIOUS** |  |  |  |
| **NEXT PREVIOUS** |  |  |  |

|  |
| --- |
| **TRAFFIC CONVICTIONS AND FORFEITURES FOR PAST 3 YEARS OR MORE (OTHER THAN PARKING VIOLATIONS).****LIST IN REVERSE ORDER, STARTING WITH MOST RECENT. ATTACH ADDITIONAL SHEET IF MORE SPACE IS NEEDED.** **DATES LOCATION CHARGE  PENALTY** |
| **MOST RECENT**  |  |  |  |
| **NEXT PREVIOUS** |  |  |  |
| **NEXT PREVIOUS** |  |  |  |

|  |
| --- |
| **DRIVER EXPERIENCE AND QUALIFICATIONS ~~~~~ LIST DETAILS OF YOUR DRIVER LICENSES.** **STATE LICENSE NUMBER TYPE  EXPIRATION DATE**  |
| **MOST RECENT**  |  |  |  |
| **NEXT PREVIOUS** |  |  |  |
| **NEXT PREVIOUS** |  |  |  |

HAVE YOU EVER BEEN DENIED A LICENSE, PERMIT, OR PRIVILEGE TO OPERATE A MOTOR VEHICLE? \_\_\_\_\_\_\_\_\_\_

HAS ANY LICENSE, PERMIT, OR PRIVILEGE EVER BEEN SUSPENDED OR REVOKED? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IF THE ANSWER TO EITHER OF THE ABOVE IS YES, ATTACH A STATEMENT GIVING DETAILS.

|  |
| --- |
| **DRIVING EXPERIENCE TYPE OF EQUIPMENT DATES APPROX NUMBER OF**  **CLASS OF EQUIPMENT (VAN, GRADER, FLAT, ETC) FROM TO TOTAL MILES** |
| STRAIGHT TRUCK |  |  |  |  |
| TRACTOR/SEMI-TRAILER |  |  |  |  |
| TRACTOR/TWO TRAILERS |  |  |  |  |
| OTHER |  |  |  |  |

**SECTION IV CONTINUED EMPLOYMENT HISTORY FOR *DRIVING POSITION APPLICANTS ONLY***

LIST STATES OPERATED IN WITHIN THE LAST FIVE YEARS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LIST SPECIAL COURSES OR TRAINING THAT WILL HELP YOU AS A DRIVER: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LIST SAFE DRIVING AWARDS YOU HOLD AND FROM WHOM THEY WERE RECEIVED: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

LIST ANY TRUCKING, TRANSPORTATION, OR OTHER EXPERIENCE THAT MAY HELP IN YOUR WORK FOR THE COUNTY: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SECTION V REFERENCES (to be completed by ALL applicants)**

List four (4) references including name, address, and phone number.

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

**SECTION VI TO BE READ AND SIGNED BY APPLICANT (to be completed by ALL applicants)**

**This certifies that all entries on this application and information in it are true, accurate and complete.**

**I authorize you to make such investigations and inquiries of my employment history (when appropriate) and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools, or persons from all liability in responding to inquiries in connection with my application.**

**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 Warren County, as permitted by law.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date Applicant’s Signature**

**I understand that Warren County maintains a Substance Abuse Policy and that I must comply with the Policy as a condition of employment with the County. I agree that I will at all times comply with Warren County’s Substance Abuse Policy, which I understand may include pre-employment and employment testing for drug or alcohol usage, as set forth more fully in Warren County’s Substance Abuse Policy.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date Applicant’s Signature**

**I understand that all employees of Warren County are employees at will and that as such, my employment, if hired, can be terminated at any time, with or without cause.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Date Applicant’s Signature**