

# HURON COUNTY

## APPLICATION FOR EMPLOYMENT

*Huron County is an Equal Opportunity Employer and does not discriminate on the basis of race, color, creed, religion, age, gender, marital status, national origin, disability, veteran status, or any other protected status.*

This application is a public record and subject to distribution upon request.

### PERSONAL

POSITION SOUGHT: \_\_\_\_\_

NAME: \_\_\_\_\_  
Last
First
M.I.

FORMER NAME OR NAMES: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ OTHER PHONE: \_\_\_\_\_

ARE YOU 18 YEARS OF AGE OR OLDER: \_\_\_\_\_  
Yes
No

ARE YOU ELIGIBLE TO WORK IN THE UNITED STATES? \_\_\_\_\_  
Yes
No

(If offered employment, you will be required to provide documentation to verify eligibility.)

### EMPLOYMENT HISTORY

**List all employment history and other work experience within the past ten years, beginning with your current employer. Include military experience. Use additional paper if necessary. Failure to include all employment history may be grounds for disqualification.**

MAY WE CONTACT YOUR CURRENT EMPLOYER? YES: \_\_\_\_\_ NO: \_\_\_\_\_

Current Employer Name &	Position title/duties, skills:	Start Date	End Date
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<b>Address</b>			
		<b>Reason for leaving:</b>	
<b>Pay: \$</b> <b>Per:</b>		<b>Supervisor:</b>	<b>Phone:</b>
<b>Employer Name &amp; Address</b>	<b>Position title/duties, skills:</b>	<b>Start Date</b>	<b>End Date</b>
		<b>Reason for leaving:</b>	
<b>Pay: \$</b> <b>Per:</b>		<b>Supervisor:</b>	<b>Phone:</b>
<b>Employer Name &amp; Address</b>	<b>Position title/duties, skills:</b>	<b>Start Date</b>	<b>End Date</b>
		<b>Reason for leaving:</b>	
<b>Pay: \$</b> <b>Per:</b>		<b>Supervisor:</b>	<b>Phone:</b>

**MILITARY**

Are you a veteran? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Duty/specialized training: \_\_\_\_\_  
 \_\_\_\_\_

**EDUCATION AND TRAINING**

	<u>Name of School</u>	<u>Yrs. Completed</u>	<u>Field of Study</u>	<u>Diploma/Degree</u>
<b>High School:</b>				
<b>College/University:</b>				
<b>Business/Technical:</b>				
<b>Additional Training:</b>				

**SKILLS AND QUALIFICATIONS**

List special skills, abilities, or honors that should be considered: \_\_\_\_\_  
 \_\_\_\_\_

List equipment, hardware, software, etc. that you are qualified to operate or repair: \_\_\_\_\_  
 \_\_\_\_\_

List professional licenses, certifications, or registrations you hold: \_\_\_\_\_  
 \_\_\_\_\_

Are you willing to attain any licenses that may be required? \_\_\_\_\_ Yes \_\_\_\_\_ No

List additional skills, including supervision, other languages, or information concerning your qualification: \_\_\_\_\_  
 \_\_\_\_\_

Do you hold a current State of Ohio driver's license: \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you hold a CDL? \_\_\_\_\_ Yes \_\_\_\_\_ No

Do you have and maintain the required insurance to drive in the state of Ohio: Yes: \_\_\_\_\_ No: \_\_\_\_\_

**ADDITIONAL INFORMATION**

MEMBERSHIPS: \_\_\_\_\_

CONVICTION RECORD: Have you been convicted of a crime other than a minor traffic offense in the past ten years: Yes: \_\_\_\_\_ No: \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

*(A conviction will not automatically disqualify you for employment. Such factors as age at time of offense, date of conviction, seriousness and nature of the crime, and rehabilitation will be taken into consideration.)*

Have you been employed before by Huron County? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, when and where? \_\_\_\_\_

Please state the name and work location of any relative employed currently by Huron County: \_\_\_\_\_

**REFERENCES**

<b><u>Professional</u></b>	<b><u>Personal</u></b>
Name:	Name:
Address:	Address:
Phone: ( )	Phone: ( )
Name:	Name:
Address:	Address:
Phone: ( )	Phone: ( )
Name:	Name:
Address:	Address:
Phone: ( )	Phone: ( )

**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge, and I authorize Huron County to verify their accuracy and to obtain reference information on my work performance. I hereby release Huron County from any and all liability of whatever kind and nature which, at any time, could result from obtaining and having an employment decision based on such information. I understand that, if employed, falsified statements of any kind or omissions of facts called for on this application shall be considered sufficient basis for dismissal.

I understand that any offer of employment may be contingent on my passing a medical and/or psychological examination and drug and alcohol testing. I understand that, if employed in a safety-sensitive position, I may be required also to submit to random, post-accident, and reasonable-suspicion drug and alcohol testing.

I understand that, given the services provided by Huron County and the responsibilities undertaken on behalf of its citizens, I may be required to work weekend, evening hours, or at other times determined necessary by my Employer, including mandatory overtime hours. I may also be required to be on-call. I understand that overtime and on-call hours will be compensated in accordance with state and federal laws, Huron County policies and procedures, and applicable collective bargaining agreements.

I understand that if an offer of employment is extended to me and accepted by me, I will fully adhere to the policies, rules, and regulations set forth by Huron County. I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an employment contract, implied or otherwise. I understand that, if employed in an unclassified position, my employment is at will and may be terminated by me or my employer with or without cause.

I further understand that Huron County jobs may require post-offer applicants to undergo a criminal background check as a contingent of employment. I release Huron County from all liability and claim of damages, along with any agency, firm, organization, or individual providing requested information to the County. It is understood that all personal information compiled as a result of this release will be used for the exclusive purpose of evaluating my candidacy for employment with Huron County.

**I solemnly swear that all of the information furnished in this employment application is true, accurate, and complete to the best of my knowledge. I authorize investigation of all statements contained in this application. I understand that any misrepresentation or falsification of the information provided may lead to withdrawal of an offer of employment or termination following employment. I recognize that my future employment with Huron County will be jeopardized if I engage in substance abuse, including drugs and alcohol, or am convicted of a felony.**

**I understand and agree to all of the information presented in the *Applicant's Agreement and Certification*.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date