



LaRue County E911

209 W High St. Suite 5
 Hodgenville, KY 42748
 Phone (270)358-9903
 Fax (270)358-4528

APPLICATION FOR EMPLOYMENT

We Consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For:	Date of Application:
--------------------------	----------------------

How Did You Learn About Us?

- Advertisement
- Employment Agency
- Friend
- Relative
- Inquiry
- Other _____

Last Name:	First Name:	Middle Name:
Address:	City:	State/ Zip Code:
Telephone Number(s) Home: Cell:	Date of Birth:	Social Security Number:

Best Time to contact you is: _____:_____ am / pm

Are you 21 years of age or older? Yes No

Have you ever filed an application with us before?
 If Yes, give date: _____ Yes No

Have you ever been employed with us before?
 If Yes, give date: _____ Yes No

Do any of your "friends" and/or relatives, other than spouse work here?
 If Yes, state name, relationship and location: _____ Yes No

- Are you currently employed? Yes No
- May we contact your present employer? Yes No
- Are you prevented from lawfully becoming employed in this Country because of Visa or Immigration Status? Yes No
Proof of citizenship or immigration status will be required upon employment.
- Are you currently on "lay-off" status and subject to recall? Yes No
- Can you travel if job requires it? Yes No

Date available for work: __/__/__ What is your desired salary range? _____

Are you available to work:

<input type="checkbox"/> Full Time (Please indicate 1 2 3 shift)
<input type="checkbox"/> Part Time (Please indicate Mornings Afternoon Evenings)
<input type="checkbox"/> Temporary (Please indicate dates available __/__ - __/__)

EDUCATION

School	Name and School Address	Course of Study	Years Completed	Diploma / Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

WORK 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:	Work Performed _____ _____ _____ _____ _____ _____
Supervisor Name:	
Address:	
Telephone Number(s)	
Starting/present Job Title:	
May We Contact Supervisor?	
Reason for Leaving:	

Employer:	Work Performed
Supervisor Name:	_____
Address:	_____
Telephone Number(s)	_____
Starting/present Job Title:	_____
May We Contact Supervisor?	_____
Reason for Leaving:	Dates Employed: From-To <u> </u> / <u> </u> - <u> </u> / <u> </u> Hourly Rate/Salary: Starting <u> </u> Ending <u> </u>

Employer:	Work Performed
Supervisor Name:	_____
Address:	_____
Telephone Number(s)	_____
Starting/present Job Title:	_____
May We Contact Supervisor?	_____
Reason for Leaving:	Dates Employed: From-To <u> </u> / <u> </u> - <u> </u> / <u> </u> Hourly Rate/Salary: Starting <u> </u> Ending <u> </u>

Employer:	Work Performed
Supervisor Name:	_____
Address:	_____
Telephone Number(s)	_____
Starting/present Job Title:	_____
May We Contact Supervisor?	_____
Reason for Leaving:	Dates Employed: From-To <u> </u> / <u> </u> - <u> </u> / <u> </u> Hourly Rate/Salary: Starting <u> </u> Ending <u> </u>

Comment: Include explanation of any gaps in employment.

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States Military.

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:

ADDITIONAL INFORMATION

Other Qualifications: Summarize special job-related skills and qualifications acquired from employment or other experience.

SPECIALIZED SKILLS (Skills/Equipment Operated)

Terminal: __	Spreadsheet: __	Production/Mobile Machinery (list)	Other (list)
PC/MAC: __	Word Processing: __	_____	_____
Typewriter: __ WPM: __	Shorthand: __ WPM: __	_____	_____

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

Note to Applicant: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.
_____ YES _____ NO

PERSONAL / PROFESSIONAL REFERENCES: *Do not include family members or past supervisors*

Name:	Phone Number:	Best Time to Call:	Occupation:

APPLICANT'S STATEMENT

I certify that answers given herein 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 of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not 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. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

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