**Application for Employment**

***Stutsman County is an Equal Opportunity Employer***

## Date

We consider applications for all positions without regard to race, gender, creed, religion, sexual orientation, national or ethnic origin or any other legally protected status.

**PLEASE TYPE OR PRINT**: Complete the entire application. If you fail to complete all questions your application will be deemed incomplete and may be rejected. You may attach a resume.

Position Applying For: Name (Last, First, Middle):

Street Address: City, State & ZIP:

SSN: Home Phone: Work Phone: Cell Phone:

E-mail: Best time to contact you?

Are you eligible to work in the US? Can you travel if the job requires it?

Are you 18 years of age or older? If 'No', what is your current age?

Are you currently employed by Stutsman County? If 'Yes', what is your current job title?

Have you ever been employed by Stutsman County?

If 'Yes', list dates of employment and reason for leaving:

Are you related to any current Stutsman County employee? If 'Yes', their name and relationship

If required, do you have a valid driver's license?

If 'Yes', State of issuance, license number and expiration date

How did you learn about this employment opportunity?

Date available to work: Desired salary range (monthly):

# Education

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name of School | City/State | Course of Study | Degree Received | Major |
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|  |  |  |  |  |

Other credentials: licenses, professional affiliations, etc., which are relevant to the job for which you are applying.

**Skills**: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge and note your level of proficiency (basic, intermediate or expert).

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

**Veteran Eligibility**: You must be a North Dakota resident and have served in the active military forces during a period of war or received the armed forces expeditionary or other campaign service medal during an emergency condition and must have been released under other than dishonorable conditions. *See NDCC 39-19.1 et Seq.*

Do you claim Veteran's Preference? (If 'Yes', you must attach a DD-214, Report of Separation)

Do you claim Disabled Veteran's Preference?

(If 'Yes', you must attach a DD-214, Report of Separation and a letter less than one year old from the US Department of Veterans Affairs indicating disability)

May we contact your current employer?

**Work Experience**: Please detail your work history. Begin with your current or most recent employer. Attach additional sheets if necessary and please explain any gaps in employment. Include full-time military or volunteer commitments. **DO NOT** complete this information with the notation "See Resume." Stutsman County reserves the right to contact all current and former employers for reference information.

Employer: Address:

Phone Number: Your Job Title:

Supervisor: Dates Employed:

Starting Hourly Rate/Salary: Final Hourly Rate/Salary: Work Performed:

Reason For Leaving:

Employer: Address:

Phone Number: Your Job Title:

Supervisor: Dates Employed:

Starting Hourly Rate/Salary: Final Hourly Rate/Salary: Work Performed:

Reason For Leaving:

Employer: Address:

Phone Number: Your Job Title:

Supervisor: Dates Employed:

Starting Hourly Rate/Salary: Final Hourly Rate/Salary: Work Performed:

Reason For Leaving:

Employer: Address:

Phone Number: Your Job Title:

Supervisor: Dates Employed:

Starting Hourly Rate/Salary: Final Hourly Rate/Salary: Work Performed:

Reason For Leaving:

If you need additional space, please reproduce this page or continue on a separate sheet of paper.

# References

Name: Phone Number:

Address:

Name: Phone Number:

Address:

Name: Phone Number:

Address:

Are you available to work full-time?

Are you available to work part-time? Morning  Afternoon Evening/Nights

# PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

## I certify that the information in this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Stutsman County to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If requested, I agree to submit to a physical exam, criminal and credit background investigation, and/or screening for illegal substances upon conditional offer of employment. I understand that this document is NOT an offer of employment, and that an offer of employment, if tendered, does NOT constitute a contract for continued guaranteed employment. I understand that staff employees of Stutsman County serve at-will, and the employment relationship may be terminated at any time by either party, for any or no reason, other than a reason prohibited by law. If employed, I will be required to furnish proof of eligibility to work in the United States, to file a State security questionnaire and State loyalty oath, and to comply with company and departmental regulations. I understand that if employed on a temporary basis, I would be paid for only hours worked, and would be ineligible for benefits including paid time off. If employed on a regular, benefits-eligible basis, I understand that I would be required to make mandatory contributions to the Stutsman County Retirement System or to an optional retirement program, if applicable. I understand that any benefits I receive may be subject to change or discontinuation at any time without prior notice. I understand that the first SIX MONTHS of regular employment represent a probational period, during which I would not be eligible to apply for transfer or promotion and during which I may be terminated without right of appeal.

By typing your name into the Applicant Signature box below, you are confirming that the above statements are true. You agree that by typing your name, you are electronically signing this document.

Applicant Signature: Date:

**US Equal Employment Opportunity**

Stutsman County encourages all applicants, as well as current employees who have not previously done so, to fill out the following Equal Employment Opportunity survey. This information is kept separate from your application and/or personnel file and is for statistical purposes only. The information you submit in this survey will not be taken into consideration when hiring. Submission of this information is completely voluntary and will be kept confidential.

Name:

Job Title / Position Applying For:

Position Status:

Sex:

Race / Ethnicity: If "Other" is chosen, please specify:

Thank you for your response. Your cooperation will allow Stutsman County to be compliant with Public Law 88-352, Title VII of the Civic Rights Act of 1964 as well as complying with rules and regulations set forth by the US Equal Opportunity Commission. For more information please visit the official web site for the EEOC located at <http://www.eeoc.gov/>

**Note: You may drop off completed form at the Stutsman County Auditor’s Office, mail to 511 2nd Ave SE Suite 102, Jamestown, ND 58401 or e-mail to** [***employment@stutsmancounty.gov*.**](mailto:employment@stutsmancounty.gov)