

# COOS COUNTY APPLICATION FOR EMPLOYMENT

1. Position applying for \_\_\_\_\_ Department \_\_\_\_\_

2. Name \_\_\_\_\_ Social Security No \_\_\_\_\_  
Last                      First                      MI

3. Mailing Address \_\_\_\_\_  
Street/ PO Box                      City                      State                      Zip

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email Address \_\_\_\_\_

4. Have you ever been convicted of a crime?  Yes  No. (Exclude those cases processed in juvenile court and minor traffic violations.) Conviction does not necessarily disqualify you from employment.

If yes, explain \_\_\_\_\_

5. EDUCATION RECORD: Did you graduate from High School?  Yes  No  
 If no, do you have a GED?  Yes  No

**COLLEGE, TRADE SCHOOL OR SPECIAL TRAINING RECEIVED**

Name and Location	From		To		Fields of Study	Credit		Certificates Degrees, etc Earned
	Mo.	Yr.	Mo.	Yr.		Semester Hours	Qtr Hours	
					Major: Minor:			
					Major: Minor:			
					Major: Minor:			

6. List any special skills, additional training, licenses or certificates you have that are pertinent to the position for which you are applying. \_\_\_\_\_  
 \_\_\_\_\_

Typing Speed \_\_\_\_\_ wpm      Shorthand or Speedwriting \_\_\_\_\_ wpm

7. REFERENCES - List the names of three persons other than former employers and relatives having knowledge of your character, experience or ability.

Name	Address	Business	Telephone
1.			
2.			
3.			

8. Do you have any relative(s) currently employed by the County  Yes  No

If yes, give name(s) and relation \_\_\_\_\_

9. If applying for a position which requires you to drive, please complete the following:

Possess a valid Oregon Driver's License?  Yes  No O.D.L. # \_\_\_\_\_

Has license been restricted, suspended or revoked in the last five years?  Yes  No

Yes, explain \_\_\_\_\_

10. EMPLOYMENT HISTORY - Beginning with your PRESENT or MOST RECENT job, describe your work experience during the past EIGHT years. In addition, list any other prior experience related to the duties of the position for which you are applying. Include volunteer work.

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Employing Firm & Address				Phone Number	
Your Job Title			Supervisor's Name & Title		
From: Mo. Yr.	To: Mo. Yr.	Full Time: ( ) Yes ( ) No	Last Salary \$	Reason for leaving	
Specific Duties					

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Employing Firm & Address				Phone Number	
Your Job Title			Supervisor's Name & Title		
From: Mo. Yr.	To: Mo. Yr.	Full Time: ( ) Yes ( ) No	Last Salary \$	Reason for leaving	
Specific Duties					

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Employing Firm & Address				Phone Number	
Your Job Title			Supervisor's Name & Title		
From: Mo. Yr.	To: Mo. Yr.	Full Time: ( ) Yes ( ) No	Last Salary \$	Reason for leaving	
Specific Duties					

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Employing Firm & Address				Phone Number	
Your Job Title			Supervisor's Name & Title		
From: Mo. Yr.	To: Mo. Yr.	Full Time: ( ) Yes ( ) No	Last Salary \$	Reason for leaving	
Specific Duties					

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11. REMARKS - Use this space for additional details and clarification. You may also attach an additional information, i.e., resume, letters of recommendation.

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12. I understand that to insure that I am not placed in a position which might be a hazard to me or to others, a physical examination or other forms of testing relating to my physical condition may be required upon offer of employment at Coos County expense and authorize release of information to Coos County, and I release Coos County from any and all liability related to the examination and/or testing.

I certify that the facts and information in this application and in any attachments or supporting documents are true and complete to the best of my knowledge. I understand that and falsification, misrepresentation or omission, as well as any misleading statements or omissions, will be cause for denial of employment or immediate termination, regardless of when or how discovered.

I authorize the investigation of all matters which Coos County deems relevant to my qualifications for employment, including all statements contained in this application and in any attachments or supporting documents. I authorize you to request and receive such information and I release from all liability any persons (such as former supervisors and managers) or employers supplying it. I also release Coos County from all liability which might result from making the investigation.

I have read the above statements and have reviewed all of the information I provided in this application and in any attachments or supporting documents.

Date: \_\_\_\_\_ Signature \_\_\_\_\_

Unsigned applications will not be processed.

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As an Equal Opportunity/Affirmative Action Employer, Coos County is dedicated to a policy of non-discrimination in employment on the basis of race, color, religion, sex, national origin, age, marital status, mental or physical disability.

Under provision of the Immigration Reform and Control Act of 1986, Coos County requires any person hired or rehired to provide evidence of identity and eligibility for employment.

OTE: If you believe your civil rights in employment matters have been violated at any time during the course of your consideration for employment, please contact the Human Resources Office.