ATHENS COUNTY APPLICATION FOR EMPLOYMENT

INSTRUCTIONS: Please fill out this employment application form as completely and accurately as possible.

Please print or write in a legible manner.

Last Name:	First Name:		Middle Initial:
Street Address:		City	/:
State: Zip Co	ode: County:		
Phone: Home:	Work (option	onal):	
*************	***********	*********	*********
Are you under 18? Yes	No If yes, can y	ou obtain a work permit?	Yes No
Have you filed an application with this	organization before? Yes_	No	Date
Have you ever been employed by this	organization? Yes	No	
Have you been convicted of a criminal	offense within the last five (5) year	rs? Yes No	o
f yes, explain			
NOTE: A criminal conviction will no	ot necessarily bar an applicant from	n employment. Other facto	rs such as age at the time of
offense, seriousness and nature of the a	• • • • • • • • • • • • • • • • • • • •	• •	is such as ago at the time s

AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER $$\mathrm{M/F/V/H}$$

SECTION II: TYPE OF WORK DESIRED

Please describe the typ	e or nature of work for which you	u are applying:			
Are you interested in:	Full Time Employment				
	Part Time Employment				
	No Preference				
Are you interested in:	Permanent Employment				
	Temporary Employment				
	Intermittent Employment				
	Seasonal Employment				
	No Preference				
What is the minimum v	weekly salary requirement?				
Date available for work	ζ				
Do you have commitm	ents to another employer which i	might affect your e	mployment with this organiz	ation?	
	Yes	No			
If yes, explain					
School(s)	Print Name, City, State for each school listing	Dates	Type of Course or Major	Graduated?	Degree Received
High School(s)					
College(s)					
Graduate School(s)					
Trade, Business, Night or Correspond.					
Other _					
	ursework or technical training yo			o perform the job f	or which you

SECTION IV: EMPLOYMENT HISTORY

Please describe your employment history – including United States Military Service. Begin with your present or most recent employer.

May we contact these employers for re	eferences? Yes No		
Employer's Name	Dates Employed	Your Job Title	
		Beginning	
Street Address/City/State	From: Month/Year	End	
	Wionul I car	Your Salary	
Supervisor's Name	To:	Beginning	Per Hour
	To: Month/Year	End	Per Hour
Describe your duties, responsibilities, o	equipment operates, instruments used, etc.:		
Describe your reason(s) for leaving:			
		X I I TO	
Employer's Name	<u>Dates Employed</u>	Your Job Title	
Street Address/City/State	From:	Beginning	
Street Address/City/State	Month/Year	End	
Supervisor's Name		Your Salary	
<u>Supervisor's Ivame</u>	To: Month/Year	Beginning	Per Hour
	Month/ Fear	End	Per Hour
Describe your duties, responsibilities, o	equipment operates, instruments used, etc.:		
Describe your reason(s) for leaving:			
Employer's Name	Dates Employed	Your Job Title	
<u> </u>	<u> </u>	Beginning	
Street Address/City/State	From: Month/Year	End	
		Your Salary	
Supervisor's Name	To: Month/Year	Beginning	Per Hour
	1.201.11.2 2 41.2	End	Per Hour
•	equipment operates, instruments used, etc.:		

(Attach additional pages if needed)

SECTION V: AGREEMENT (Please carefully read the following statement.)

I hereby attest that the information provided on this employment application (and accompanying resume, if any) is true, accurately and complete to the best of my knowledge. I understand that any misrepresentation, falsification or significant omissions of information may disqualify me from further consideration for employment, and may be considered as grounds for dismissal if discovered following employment.

SECTION VI: REI	FERENCES		
Name:	Phone	Name:	Phone:
Address:		Address:	
Name:	Phone:	Name:	Phone:
Address:		Address:	
Name:	Phone:	Name:	Phone:
Address:		Address:	
Name:	<u>Phone</u> :	Name:	Phone:
Address:		Address:	
		Applicants Signature	
Scribed and duly swor	n before me according	to law, by the above named applicant this _	day of
at	, County of	and state of	
		Signature of Officer	
		Official Title	