## COKE COUNTY Employment Application

Coke County is an Equal Opportunity Employer

APPLICANT	INFORMATION						
Last Name				First	M.I.	Date	
Street Address			Apartment/Unit #				
City				State	ZIP		
Phone				E-mail Address			
Date Available				. 1001 (23)			
Position Applied	for					,	
Are you authorized to work in the U.S.? YES NO							
Have you ever worked for Coke County?		YES 🗌	NO 🗌	(Proof of identity and e	ligibility will be required u	upon employment)	
Have you ever b felony?	een convicted of a	YES [	NO 🗌	If you have ever applied for a bond, has your application been rejected?			
EDUCATION							
High School	Did you graduate?		YES 🗌	NO 🗌			
College	Did you graduate?		YES	NO []			
			-,				
REFERENCES			a degler services	-			
	professional references (o	ther than rela	atives or for	mer employers)			
Full Name				Relationship			
Company				Phone		( )	
Address					2		
Full Name				Relationship			
Company				Phone	( )		
Address							
Full Name				Relaționship			
Company	7			Phone		( )	
Address							
PREVIOUS E	MPLOYMENT						
Company					Phone ( )		
Address					Supervisor		
Job Title				Starting Salary	\$ E	nding Salary \$	
Responsibilities							
From	То		Reason for	Leaving			
May we contact	your previous supervisor f	or a reference	:e?	YES 🗆	№ П		

Company				Phone	(	)		
Address				Superviso	r 	0 4		
Job Title			Starting Salary	\$			Ending Salary	\$
Responsibilities	** ***							
From	То	Reason for Leaving						
May we contact your previous su	pervisor for a referer	nce?	YES 🗌	NO 🗆				
Company				Phone	(	)		
Address				Superviso	or Or			
Job Title			Starting Salary	\$		-	Ending Salary	\$
Responsibilities		ð						
From	То	Reason for Leaving	9					
May we contact your previous su	upervisor for a refere	nce?	YES 🗆	NO 🗆				
								****
MILITARY SERVICE								
Branch						From	То	
Rank at Discharge						Туре	of Discharge	
If other than honorable, explain	1							
DISCLAIMER AND SIGNA								
I understand that employment that the county or employee is herein are true and complete to	free to terminate em	ployment with the ot	drug and alcohol ther at any time v	test. I und vith or witho	erstan out ca	d that use or	Coke County is notice. I certif	an "at will" employer, and y that the answers given
Signature							Date	

## Personal Data

		*
Last Name	First Name	Middle Name
Current Address		Dates Lived Here
Addresses for the Past 7 Ye	ears: (include street, city, state, zip code)	Dates of Residence:
Date of Birth Ot	her Names Used (including maiden name)	Years Used
Social Security Number	Driver's License #	State
Email Address (may be use	ed for official correspondence)	· .
understand and agree that	of the personal data I have provided are true, a t any omission, false statement, misleading sta upplements to it and in any interviews will be s scharge after employment.	tement, or answer made by r
Printed Name		
Applies at Circuit		
Applicant Signature		Date

## COKE COUNTY

## AUTHORIZATION FOR BACKGROUND CHECK

	sign this form in pletion of the applic	the space provided cation process.)	l below. Y	our written	authorization is
qualifications for papplying. I underst such information, outside entities of	ourposes of evaluat and that Coke Coun and I specifically a the county's choice	horize Coke Counting whether I am quity will utilize an out the interest of the interest and interest and will be done, and my	ualified fo tside firm ovestigation that I may	r the position or firms to ass by informat withhold my	n for which I am sist it in checking tion services and permission and
Signature of Appli	ċant	Date			
Applicant's Name	- Printed				