



Leon County Employment Application

EQUAL OPPORTUNITY EMPLOYER M/F/D/V

THE AGE DISCRIMINATION IN EMPLOYMENT
ACT OF 1967 FORBIDS DISCRIMINATION
AGAINST PERSONS AGED 40 OR OLDER

YOU MUST ANSWER ALL QUESTIONS TO BE CONSIDERED FOR A POSITION

| Name | | Today's Date | | |
|--|-------------------|-----------------------------|--------|-------|
| Mailing Address | | Phone Number | | |
| Have you ever pled "guilty" or "no contest" to; received "deferred adjudication"; or been convicted of a crime (over the age of 16?) | | | | |
| <input type="checkbox"/> Yes | | <input type="checkbox"/> No | | |
| If yes, please give details. | | | | |
| Are you related by blood or marriage to any Leon County employee or official? | | | | |
| <input type="checkbox"/> Yes (If yes, provide name and relationship.) | | <input type="checkbox"/> No | | |
| Referred by: | | Position Applying for: | | |
| Driver's License Number and State (if the position you are applying for requires it) | | | | |
| EDUCATION: Please identify any educational background you believe we should consider in evaluating your qualifications for the position you are seeking. | | | | |
| Educational Level | Name, City, State | Number of yrs. completed | Degree | Major |
| High School | | | | |
| | | | | |
| Community or Junior College | | | | |
| | | | | |
| Business or Trade School | | | | |
| | | | | |
| College or University | | | | |
| | | | | |
| Graduate School | | | | |
| | | | | |
| Describe any licenses, certifications applicable to the position for which you are applying: | | | | |
| _____ | | | | |
| Describe any job-related training applicable to the position for which you are applying: | | | | |
| _____ | | | | |
| Describe any computer, office equipment or other machinery/equipment operated: | | | | |
| _____ | | | | |
| _____ | | | | |

Previous Employment

All Questions Must be Answered Even if Supplemented with a Resume

Provide employer information for the last 10 years and any other work history you feel is relevant to the position for which you have applied. Attach extra sheets if necessary.

From (Mo/Yr.) _____ To (Mo/Yr.) _____ Your Position _____
 Employer: _____ Your Supervisor: _____
 Address: _____ Phone: _____
 Type of Business: _____ Reason for leaving: _____
 Base Salary _____ / _____ Monthly Weekly Bi-weekly Hourly
 Start Final
 Brief Description of your Duties and Responsibilities: _____

From (Mo/Yr.) _____ To (Mo/Yr.) _____ Your Position _____
 Employer: _____ Your Supervisor: _____
 Address: _____ Phone: _____
 Type of Business: _____ Reason for leaving: _____
 Base Salary _____ / _____ Monthly Weekly Bi-weekly Hourly
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 Brief Description of your Duties and Responsibilities: _____

From (Mo/Yr.) _____ To (Mo/Yr.) _____ Your Position _____
 Employer: _____ Your Supervisor: _____
 Address: _____ Phone: _____
 Type of Business: _____ Reason for leaving: _____
 Base Salary _____ / _____ Monthly Weekly Bi-weekly Hourly
 Start Final
 Brief Description of your Duties and Responsibilities: _____

| | | |
|-------------------------------------|--------------------------|--|
| Date Available to Start: | Starting Salary Desired: | Have you made an application before? If yes, when? |
| Alternate Contact Information Name: | | Phone: |

Pre-Employment Statement

I authorize Leon County to make any inquiries they desire regarding my education, employment, ability, habits and personal character for the purpose of determining my fitness for employment. I also authorize previous employers or any other persons with whom the County may confer to give any and all information regarding my employment or scholastic record together with any information, personal or otherwise, and I hereby release such persons and any companies which they represent from all liability or any damages whatsoever in connection with their compliance. I understand that misrepresentation or omission of any fact or circumstance called for in this application which would affect my application unfavorably or receipt of unsatisfactory references will be sufficient cause for termination without liability. This application is not an employment contract and is not intended to create contractual obligations of any kind. Neither the County nor its employees are bound to continue the employment relationship if either chooses at its will to end the relationship at any time. All employment is at will and the relationship cannot be modified unless in writing.

Signature _____

Date _____