

Application for Employment

Bracken Co Fiscal Court

Position(s) applied for _____ Date of Application _____

Name _____
Last First Middle

Address _____
Street City State Zip

Phone (____) _____ Social Security _____ Date of Birth ____/____/____

Have you ever been employed by the Bracken Co. Fiscal Court before? _____

If yes, please indicate what department and reason for leaving _____

Are you a family member of anyone employed with the Bracken County Fiscal Court or any of its departments, including any and all offices operated by an elected official? _____

If yes, please indicate name of family member, relation and what office they are employed

Are you legally eligible for employment in the United States? _____

Date available for work: ____/____/____

Type of employment desired:

Full-Time _____ Part-Time _____ Seasonal/Temporary _____

Drivers License number if driving is essential for job function:

Drivers License # _____ State _____

CDL # _____ State _____

Are you able to meet the attendance requirements for this position? _____

Have you been convicted of a crime in the last seven (7) years? _____

If yes, please explain: _____

Employment History

Provide the following information for your past three (3) employers, assignments, or volunteer activities, starting with the most recent.

From: ____ / ____ / ____ To: ____ / ____ / ____ Employer: _____

Address: _____ Telephone _____

Job Title _____

Immediate Supervisor/Title: _____

Summarize the nature of work performed and job responsibilities:

Reason for leaving: _____

Hourly Rate/Salary: Start: \$ _____ per _____ Final: \$ _____ per _____

From: ____ / ____ / ____ To: ____ / ____ / ____ Employer: _____

Address: _____ Telephone _____

Job Title _____

Immediate Supervisor/Title: _____

Summarize the nature of work performed and job responsibilities:

Reason for leaving: _____

Hourly Rate/Salary: Start: \$ _____ per _____ Final: \$ _____ per _____

From: ____ / ____ / ____ To: ____ / ____ / ____ Employer: _____

Address: _____ Telephone _____

Job Title _____

Immediate Supervisor/Title: _____

Summarize the nature of work performed and job responsibilities:

Reason for leaving: _____

Hourly Rate/Salary: Start: \$ _____ per _____ Final: \$ _____ per _____

Signature

Date

