



Humboldt County
 203 Main Street, Box 100
 Dakota City, Iowa 50529
 Telephone (515) 332-1571
 (An Equal Opportunity Employer)

APPLICATION FOR EMPLOYMENT

Position applied for _____ Date of application _____

Name _____
 First Middle Initial Last

Address _____
 House # Street City State Zip Code

Telephone _____ Mobile _____ E-mail Address _____

Have you ever been employed here before? If yes, give dates and positions. Yes No

Are you 18 years of age or older? Yes No

Are you legally eligible for employment in this country? Yes No

Date available for work _____ Type of employment desired

What is your desired salary range? _____ Full-time Part-time Temporary Seasonal

Driver's license number if driving may be required in position for which you are applying _____ State

The law prohibits discrimination in hiring due to age, race, color, creed, sex, national origin, religion, disability or veteran's status.

Employment History

Starting with your most recent employer, provide the following information.

Employer	Telephone	Dates employed:			
		Compensation (Starting)			
Street Address	City	State	Hourly	Salary \$	per
Starting job title/final job title		Compensation (Ending)			
		Hourly Salary \$ per			
Immediate supervisor and title (for most recent position held)					
May we contact for reference? Yes No Later					
Why did you leave?					
Summarize the type of work performed and job responsibilities.					

Employer	Telephone	Dates employed:			
		Compensation (Starting)			
Street Address	City	State	Hourly	Salary \$	per
Starting job title/final job title		Compensation (Ending)			
		Hourly Salary \$ per			
Immediate supervisor and title (for most recent position held)					
May we contact for reference? Yes No Later					
Why did you leave?					
Summarize the type of work performed and job responsibilities.					

Employer	Telephone	Dates employed:	
		Compensation (Starting)	
Street Address	City	State	Hourly Salary \$ _____ per
Starting job title/final job title		Compensation (Ending)	
		Hourly Salary \$ _____ per	
Immediate supervisor and title (for most recent position held)			
May we contact for reference?		Yes	No
Why did you leave?		Later	
Summarize the type of work performed and job responsibilities.			

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may assist you in performing the position for which you are applying.

Educational Background

Start with your most recent school attended, provide the following information.

School (include City & State)	Years Completed	Awarded	
		Diploma	GED
		Degree	Other
		Certificate	
		Diploma	GED
		Degree	Other
		Certificate	
		Diploma	GED
		Degree	Other
		Certificate	

References

List name and telephone number of three business/work references who are *not* related to you and are *not* previous supervisors. If not applicable, list three school or personal references who are *not* related to you.

Name	Title	Relationship	Telephone	Known How Long

Military

Have you ever been in the Armed Forces? Yes No
 If yes, dates of active duty _____

I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that, should this application contain any false or misleading information, my application may be rejected or my employment with this company terminated.

Signature

Date

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers (if marked yes), public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using truthful and non-defamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such about me.

I understand that this employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or eliminating any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 30 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary for me to reapply and fill out a new application.

If offered a position and requested to, I agree to complete the Iowa Division of Criminal Investigation Criminal History Record Check Request Form. I understand that actual employment is subject to Human Resources' approval of the criminal history record check.

If I am hired, I understand that I am free to resign at any time, with or without cause and with or without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer.

I also understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 Form in this regard.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) eliminate me from further consideration for employment, or (ii) may result in my immediate discharge from the employer's service, whenever it is discovered.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant

Date