

BARTON COUNTY

Employment Application

1400 Main – Room 107, Great Bend, KS 67530
 (620) 793-1800 • www.bartoncounty.org



APPLICANT INFORMATION

Last Name		First		M.I.		Date	
Street Address				Apartment/Unit #			
City			State		ZIP		
Phone			E-mail Address				
Date Available			Driver's License #			Desired Salary	
Position Applied for							
Are you available to work:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Shift Work <input type="checkbox"/> On call as needed <input type="checkbox"/> Temporary						
Are you authorized to work in the U.S.?	YES <input type="checkbox"/>	NO <input type="checkbox"/>					
Have you ever worked for the County?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?				
How did you hear about the open position?	Newspaper <input type="checkbox"/> Internet / Web Posting <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Other <input type="checkbox"/> _____						

EDUCATION

High School				Address			
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College				Address			
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Other				Address			
Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				

REFERENCES

Please list three professional references. Do include one employer. Do not include relatives.

Full Name			Relationship		
Company			Phone		
Address					
Full Name			Relationship		
Company			Phone		
Address					
Full Name			Relationship		
Company			Phone		
Address					

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary \$	Ending Salary \$	
Responsibilities			
From	To	Reason for Leaving	

May we contact your previous supervisor for a reference? YES NO

MILITARY SERVICE

Honorable discharge from military service, when

SPECIALIZED SKILLS

- Microsoft Word Microsoft Excel Microsoft Outlook Microsoft Access Microsoft PowerPoint
- Microsoft Publisher QuickBooks Driver's License Type _____

Equipment / Machinery Operated (list) _____

Other (list) _____

OTHER QUALIFICATIONS

Other skills, abilities, qualifications, certifications, specialized or technical training not previously listed that may be relevant to this position. Additional sheets or a resume may be attached.

DISCLAIMER AND SIGNATURE

ACKNOWLEDGEMENT

I understand that by submitting this application, I am certifying that the facts contained in this application are true and complete to the best of my knowledge and I understand that, if employed, falsified statements on this application will be grounds for dismissal.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I additionally acknowledge that this may include an investigation of my driving record and/or criminal background.

I understand, that as a condition of employment, I will be subject to a physical examination to determine if I would be capable of performing the duties to which I would be assigned and to a pre-employment drug test. I further understand that the results of such a test would remain confidential would be paid by Barton County.

I hereby understand and acknowledge that, unless otherwise defined by applicable law any employment relationship with Barton County is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understand that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized Barton County official.

I understand that Barton County is an Equal Opportunity Employer and that no individual will be rejected because of race, color, religious creed, national origin, sex, age, handicap, or marital status.

By signing this application, I acknowledge that I am the individual whose name appears on the application. Once signed, the application can be submitted in person, via mail, email, or fax. Barton County will treat this both original signature and electronic signatures as an original signature. Applications must be received by the closing date and time of the open application period in order to be considered. Applications will be accepted only during open application periods.

Applications will remain on file in the Barton County Administrator's Office for two years from the date of admittance. If I wish for my application to be reviewed for any other job opening, I must notify the Barton County Administrator's Office during the announced application period.

Signature

Date