

JOB APPLICATION GREENWOOD COUNTY

311 North Main, Courthouse * Eureka, KS 67045 Phone 620-583-8121 * Fax 620-583-8124 www.greenwoodcounty.org

GREENWOOD COUNTY is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a county representative.

Please fill out all of the sections below:

Applicant Information Date of Application:						
Applicant Name:						
Address:	ddress:					
City, State and Zip Code:	City, State and Zip Code:					
elephone Number:						
						Employment Position Position(s) applying for:
How did you hear about this position?						
On what date can you start working if you are hired?						
Salary/Pay desired:						
Personal Information						
Have you ever applied to or worked for GREENWOOD CO	JNTY before?	Yes	No			
f yes, when and what department?						
Do you have any friends, relative, or acquaintances working	g for GREENWOOD COUNTY?	Yes	No			
f yes, state name & relationship:						
are you 18 years of age or older?		Yes	No			
re you a U.S. citizen or approved to work in the United St	ites?	Yes	No			

What document can you provide as proof of citizenship or legal status?					
Will you consent to a r	nandatory controlled substance to	est?	Yes	No	
Do you have any cond	ition which would require job acco	ommodations?	Yes	No	
If yes, please describe	accommodations required below.				
	nvicted of a criminal offense (felo		Yes	No	
if yes, please state the	nature of the crime(s), when and v	vhere convicted and disposi	tion of the case:		
Job Skills/Qualifications Please list below the sk	s ills and qualifications you posses	s for the position for which y	you are applying:		
be necessary for eligible	OUNTY complies with ADA and co le applicants/employees to perfor d may be subject to a medical exa	m essential functions. It is	possible that a hire	e may he	
ligh School					
Name	Location (City, State)	Year Graduated	Degree Earn	ied	
College/University					
Name	Location (City, State)	Year Graduated	Degree Earn	ed	
ocational School/Special	alized Training Location (City, State)	Year Graduated	Dogres Fa	- d	
		Tour Oraduated	Degree Earn	ea	

Military:
Are you a member of the Armed Services?
What branch of the military did you enlist?
What was your military rank when discharged?
How many years did you serve in the military?
What military skills do you posses that would be an asset for this position?
Previous Employment
Employer Name:
Job Title:
Supervisor Name:
Employer Address:
City, State and Zip Code:
Employer Telephone:
Dates Employed:
Reason for leaving:
Employer Name:
Job Title:
Supervisor Name:
Employer Address:
City, State and Zip Code:
Employer Telephone:
Dates Employed:
Reason for leaving:

Employer Name:				
Job Title:				
Supervisor Name:				
Employer Address:				
City, State and Zip Code:				
Employer Telephone:				
Reason for leaving:				
References Please provide 3 personal and professional reference(s) below: Reference Contact Information				
Reference				
Please attach any other information you wish to submit with this job application. AT-WILL EMPLOYMENT The relationship between you and GREENWOOD COUNTY is referred to as "employment at will." This means that your employment can be terminated at any time for any reason, with or without cause, with or without notice, by you or GREENWOOD COUNTY. No representative of GREENWOOD COUNTY has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is 'at will," and that you acknowledge that no oral or written statement or representations regarding your employment can alter your at-will employment status.				
Applicant Signature:	Dated:			