Application for Employment



Pike County 801 E. Main Street Petersburg, IN 47567 812-354-6451

Please Print

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

| Name | | Ap | pplicant ID # | |
|--|--------------------------|--|-----------------------------------|--------------------------------------|
| Last | First | Middle | | |
| AddressStreet | 1 1 - 4 6 | | State | |
| | | E-mail Add | | 20 8 |
| Position(s) applied for | | Da | ite of application | |
| Referral Source (Please check the appropriate categories | ory and list the source. | | | |
| Walk-In | | School | | |
| Employee | | Job Fair | | |
| Advertisement | | Staffing Agency | | |
| Company's Website | | Government Employment Agency | y | |
| Other Internet | | Other | | |
| If necessary, best time to call you is | am PM | Will you work overtime if | | |
| May we contact you at work? | Yes No | If no , please explain: | | |
| If yes , work number and best time to call: | | - | | |
| () | AM PM | Are you able to perform the | | |
| If you are under 18 and it is required, | □ Vaa □ Na | you are applying (with or This question is not designed to el | | |
| can you furnish a work permit? | | not provide information about the whether accommodation is necessary | existence of a disability, partic | ular accommodation, or |
| If no , please explain: | | extent permitted by law. | | |
| Have you submitted an application here before?. If yes, give date(s) and position(s): | | Yes No | Need more inform | mation about the nctions" to respond |
| in yes, give date(s) and position(s). | | Driver's license number re | • | • |
| Have you ever been employed here before? | Yes No | . 1 6 1 . 1 | | |
| If yes, give dates: From/ To | | | | State |
| Is this application a request for reemploymen | | Have you ever been bond | ed? | Yes No |
| following an extended military leave of absen | | Answering "yes" to the following | question does not constitute a | n automatic bar to |
| from this company? | Yes No | employment. Factors such as dat violation, rehabilitation and posi | e of the offense, seriousness | and nature of the |
| Are you legally eligible for employment in this country? | Yes No | | | med decount. |
| Date available for work | , , | or been convicted of a crim | _ | _ |
| What is your desired salary range or hourly rate of | | If yes , please provide | date(s) and details: | |
| \$Per | | | | |
| Type of employment desired: Full-Time | Part-Time | | | |
| ☐ Educational Co-Op ☐ Seasonal | ☐ Temporary | Have you entered into an a | greement with any form | ner employer or other |
| Will you relocate if job requires it? | Yes No | party (such as a noncomp | | |
| Will you travel if job requires it? | Yes No | restrict your ability to wo | | |
| If they have been explained to you, are you able t | to meet the | If yes , please explain: | | |
| attendance requirements of the position? | N/A L Yes L No | J | | |

Starting with your most recent employer, provide the following information. Telephone # Employer Dates employed: Compensation (Starting) Street address City State Hourly Salary Starting job title/final job title Commission/Bonus/Other Compensation May we contact for reference? Compensation (Final) Immediate supervisor and title (for most recent position held) Yes No Later Hourly Salary Why did you leave? Commission/Bonus/Other Compensation \$ Summarize the type of work performed and job responsibilities. What did you like most about your position? What were the things you liked least about the position? Telephone # Employer Dates employed: Street address State Compensation (Starting) Hourty Salary per Starting job title/final job title Commission/Bonus/Other Compensation Immediate supervisor and title (for most recent position held) May we contact for reference? Yes No Later \$ Hourly Salary Why did you leave? \$ Commission/Bonus/Other Compensation E-mail: Summarize the type of work performed and job responsibilities. What did you like most about your position? What were the things you liked least about the position? Employer Telephone # Dates employed: Street address State Compensation (Starting Starting job title/final job title Commission/Bonus/Other Compensation Immediate supervisor and title (for most recent position held) May we contact for reference? Compensation (Final) No Later Yes \$ Hourly Salary Why did you leave? \$ Commission/Bonus/Other Compensation E-mail: Summarize the type of work performed and job responsibilities. What did you like most about your position? What were the things you liked least about the position? Telephone # Employer Year Dates employed: Street address State Compensation (Starting Hourly Salary per Starting job title/final job title \$ Commission/Bonus/Other Compensation May we contact for reference? Compensation (Final) Immediate supervisor and title (for most recent position held) __ No Later \$ Hourty Salary per Why did you leave? \$ Commission/Bonus/Other Compensation Summarize the type of work performed and job responsibilities. What did you like most about your position? What were the things you liked least about the position?

Employment History

| Employment History (Explain any gaps in your empl | | nose due to persona | l illness, iniu | ry or disability. | | |
|--|---------------------------|-----------------------------|-----------------|----------------------------------|-----------------|-----------------------|
| | ., | | | -, | | |
| f not addressed on previous pa | age, have you ever be | en fired or asked to | resign from a | ı job? | | Yes |
| If yes , please explain: | | | | | | |
| - | | | | | | |
| | | | | | | |
| Skills and Qualification | ons | | | | | |
| ummarize any special training | g, skills, licenses and/ | or certificates that r | nay assist you | in performing the posi | tion for which | you are applyi |
| | ß. | | | | | |
| | | | | | | |
| computer Skills (Check appropr | iate boxes. Include softw | are titles and years of (| experience.) | | | |
| Word Processing | | | | InternetYea | | |
| | | | | Years | | |
| Presentation | | | | Years | | ALLES AND SAME IN CO. |
| E-mail | | Years: | Other _ | | | Years: |
| Educational Backgrous tarting with your most recent | | ide the following in | formation | | | |
| | nclude City and State) | ide the following in | Years | Completed | GPA | Major/Minor |
| School (include city and state) | | | Completed | □ Diploma □ GED | Class Rank | Plajor/Pitrior |
| | | | | Degree | | |
| | | | | □ Other □ Diploma □ GED | | |
| | | | | Degree Certification | | |
| | | | | ☐ Other GED | | LK F |
| | | | | ☐ Degree ☐ Certification ☐ | | |
| | | | | ☐ Other ☐ GED | | |
| | | | ☐ Degree | | | |
| | | | | _ out | | |
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| and the second s | l C-l l : | / | | | | • ******* |
| References ist names and telephone num f not applicable, list three scho | | | | ated to you and are <i>not</i> [| orevious superv | visors. |
| ist names and telephone num | | nces who are <i>not</i> rel | ated to you. | | orevious superv | #of Y |
| ist names and telephone num not applicable, list three sch | ool or personal refere | nces who are <i>not</i> rel | ated to you. | ated to you and are <i>not</i> p | | #of Y |
| ist names and telephone num f not applicable, list three sch | ool or personal refere | nces who are <i>not</i> rel | ated to you. | | | # of Y |
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| ist names and telephone num not applicable, list three sch | ool or personal refere | nces who are <i>not</i> rel | ated to you. | | | #of Y |
| ist names and telephone num not applicable, list three scho Name | Title | nces who are <i>not</i> rel | ated to you. | | | #of Y |
| ist names and telephone num not applicable, list three sch | Title | nces who are <i>not</i> rel | ated to you. | | | #of Y |

Related Information

To what job-related organizations (professional, trade, etc.) do you belong?

Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve, National Guard or any other similarly protected status.

| Organization | Offices Held |
|---|--|
| | |
| | |
| | |
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| | |
| ist special accomplishments, publications, awards, etc. | |
| exclude information that would reveal race, color, religion, sex, national origin, citizenship, any other similarly protected status. | age, mental or physical disabilities, veteran/reserve, National Guard or |
| y said said y protected states. | |
| | |
| n your current or a previous job, have you ever written instructions or direction | 1.6.11 |
| Yes No Not Applicable | ons to be followed by employees or customers? |
| 7.5 | |
| If yes , please explain: | |
| | |
| s there any other job-related information you want us to know about you? | |
| | |
| Applicant Statement | |

I certify that all information I have provided in order to apply for and secure work with this 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, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resumé 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 nondefamatory information, in a lawful manner, in the employment process and all other persons, corporations or organizations for furnishing such information 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 any 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 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's president.

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.

This Company does not tolerate unlawful discrimination in its employment practices. No question on this application is used for the purpose of limiting or excluding an applicant from consideration for employment on the basis of his or her sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status under applicable federal, state, or local law. This Company likewise does not tolerate harassment based on sex, race, color, religion, national origin, citizenship, age, disability, or any other protected status. Examples of prohibited harassment include, but are not limited to, unwelcome physical contact, offensive gestures, unwelcome comments, jokes, epithets, threats, insults, name-calling, negative stereotyping, possession or display of derogatory pictures or other graphic materials, and any other words or conduct that demean, stigmatize, intimidate, or single out a person because of his/her membership in a protected category. Harassment of our employees is strictly prohibited, whether it is committed by a manager, coworker, subordinate, or non-employee (such as a vendor or customer). The Company takes all complaints of harassment seriously and all complaints will be investigated promptly and thoroughly.

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 STATEMEN | |
|--|---------------------------|
| I certify that I have read, fully understand and accept all terms of the foreg | oing Applicant Statement. |
| Signature of Applicant | Date / / |



