

EMPLOYMENT APPLICATION
An Equal Opportunity/Affirmative Action Employer



Date: _____

Position applied for: _____ Full Time Part-Time

Date you can begin work: _____

This application must be filled out, completely in order to be considered for employment. You may provide a resume, although you must also complete this application. Please print in ink or type and do not leave any blank spaces.

PERSONAL INFORMATION

Name _____ SSN _____

Address _____ City _____

State _____ Zip Code _____ County _____

Phone Number (day) _____ (evening) _____

How long at present address? _____ Previous address? _____

Are you over 21 years of age? _____ Are you lawfully eligible to be employed in this country? _____
(Proof of citizenship or immigrations status will be required upon employment)

Are you a veteran? _____ Have you ever worked for Oldham County Fiscal Court in the past? _____

If yes when? _____ What Department? _____

Do you have any relatives working for Oldham County Fiscal Court? Yes No if yes, whom? _____

Do you have a valid driver's license? _____ License ID# _____

Issuing State _____ Expiration date _____

Have you ever been convicted of a Felony? _____ Misdemeanor? _____ Traffic Violation? _____

If yes, please explain and give dates: _____

(A conviction does not automatically eliminate you from employment consideration. The nature of the offense, when it occurred and your truthfulness may be taken into consideration.)

EDUCATION

Name and Address	Did you graduate	Diploma/Degree completed	Field of study
High School:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
College:	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Other (i.e., military, vocational, technical, ect.)	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please list your professional memberships, certificates, designations, licenses, honors, awards, fellowships, ect.

1. _____ 2. _____
3. _____ 4. _____

U.S. MILITARY SERVICE

List below any and all military service you have had or are presently serving

Branch _____ Rank and Type of Service _____

Training/Experience Received _____

EMPLOYMENT HISTORY

(This section must be completed; it cannot be substituted with a resume.)

List all experience in order starting with your present or most recent position and working backwards. Account for **all** periods of unemployment. Attach additional sheet (s), as needed.

Employer _____	Dates of Employment: From _____	To _____
Address _____	City _____	State _____
Telephone _____	Supervisor's Name _____	
Job Title _____	Reason for leaving _____	
Description of Duties _____		

_____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer _____	Dates of Employment: From _____	To _____
Address _____	City _____	State _____
Telephone _____	Supervisor's Name _____	
Job Title _____	Reason for leaving _____	
Description of Duties _____		

_____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer _____	Dates of Employment: From _____	To _____
Address _____	City _____	State _____
Telephone _____	Supervisor's Name _____	
Job Title _____	Reason for leaving _____	
Description of Duties _____		

_____ May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

REFERENCES

	Name	Occupation	Years Known	Address	Contact #
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

ALL APPLICANTS PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING:

I understand that completion of this application does not indicate that there are any open positions and does not in any way obligate the Oldham County Detention Center to hire me or offer me a job.

I understand that the Oldham County Detention Center is an equal opportunity employer and selects individual's based upon job related qualifications regardless of race, color, religion, sex, national origin, age or handicapped status. In the processing of my application, an investigation will/may be made whereby information is obtained from former employers and references. Permission is hereby granted to any school, person, firm or corporation whether my former employer or otherwise, to give the Oldham County Detention Center information that may be require to arrive at an employment decision, and I hereby release the Oldham County Detention Center, its officers, employees, representative, or agents from any and all liability and/or damage incurred by myself in obtaining such information.

I understand that employment and compensation can be terminated, with or without cause or notice at any time, at the option of either the Oldham County Detention Center or myself, and that no manager or supervisor has the authority to enter into an employment agreement for any specified period of time or to make agreements contrary to the foregoing.

I understand that the Oldham County Detention Center reserves the right to use any method of investigation which, at its sole discretion, it deems reasonable and necessary to determine whether any employee has engaged in conduct warranting disciplinary action, including, but not limited to a search of any property of mine on the Oldham County Detention Center premises. As a condition of continued employment, if hired, I agree to cooperate in any such investigation.

I understand that if hired, my continued employment is predicated upon the truthfulness and accuracy of the statements contained herein, and that I am subject to termination if any statement in this application is false or misleading. If hired, I agree to conform to the rules and regulations of the Oldham County Detention Center as issued from time to time and that only those rules and regulations that are then in effect apply to my continued employment with the Oldham County Detention Center . I understand this application will remain active for six (6) months and if I have not been hired by that date, I must renew my application to be considered for future employment.

Signature _____ Date _____

APPLICANTS PLEASE DO NOT WRITE BELOW THIS LINE

Interviewed by: (1) _____ (2) _____ (3) _____

Starting Date: _____ Rate: _____ Job Title: _____

Approved By: _____

APPLICANT CONSENT FORM TO INVESTIGATE AND DISCLOSE DATA

I, _____, hereby allow the Oldham County Detention Center the right to contact and investigate my former and current employers, and all other pertinent parties, including, but not limited to education institutions where I enrolled, to fully investigate my background.

I understand that as part of the interview process, since I am applying for the position of _____, the Oldham County Detention Center required all applicants to disclose pertinent data concerning previous work history, police and military records, and educational activities.

The purpose and procedures used in this investigation have been fully described to me and I completely understand the reasons and potential uses of such investigations. I authorize the Oldham County Detention Center to use any and all information acquired to make decisions regarding my employment, which may be disclosed to third parties.

I understand and agree that if I am offered employment by the Oldham County Detention Center, and it is discovered that any material facts differ from those stated by me on my employment application, at my interview, or at any time prior to my commencing employment at the Oldham County Detention Center any offer of employment will be rescinded. Furthermore, I understand and agree that if material facts are later discovered which are inconsistent with or differ from facts I furnished before taking the job, I will be disciplined, including immediate discharge without warning.

The cost of this investigation will be paid by the Oldham County Detention Center. Nonetheless, I hereby indemnify, release and forever discharge and hold Oldham County Fiscal Court, the Oldham County Detention Center, its subsidiaries and affiliated companies, agents and employees, as well as all third parties supplying such information, harmless from any and all claims, demand, judgments and legal fees arising out of or in connection with this investigation, the results, or any lawful use of the results or disclosure thereto.

We are a drug free environment ; you will be required ton have a drug test administered prior to employment.

Signature of Applicant

Printed Name of Applicant

Social Security Number _____ - _____ - _____

Date _____