



COWLEY COUNTY • 311 E. 9th Ave. • Winfield, KS 67156

Application For Employment



General Information

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Name: _____

Address: _____

Daytime Telephone: _____ Social Security No: _____

Position Desired: _____ Department: _____

Available to work: Full-time Part-time Temporary
 Evenings Weekends

Date available to work: _____

Yes No Have you been employed with Cowley County Before?

If yes: When: _____

Department/Position: _____

Yes No Do you have any relatives working for the County of Cowley?

If yes: In Which Dept: _____

Yes No Are you legally eligible for employment in the U.S.?

Yes No Are you 18 years of age or over?

Yes No Will you work overtime?

Yes No Are you currently in "lay-off" status?

Yes No Can you travel if a job requires it?

Yes No Have you ever been convicted of an offense against the law other than a minor traffic violation?

If yes: Explain: _____

Complete this section if you served in the U.S. Armed Forces

Period of Active Duty: _____

Rank at Discharge: _____ Date of Final Discharge: _____

Were you dishonorably discharged? Yes No

Describe your duties and any special training:

Education

Check highest grade completed:

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16

If you did not complete high school, do you have a GED? yes no

Name and Location	Course of Study	Year Complete	Did you Graduate	Degree or Diploma
High School				
College/Univ.				
Business/Trade School				
Other				

Skills Inventory

Check those skills which you have acquired

Clerical	Technical	Maintenance
<input type="checkbox"/> Typing WPM _____	<input type="checkbox"/> Computer Programming	<input type="checkbox"/> Truck Driver to 1.5 tons
<input type="checkbox"/> Shorthand WPM _____	<input type="checkbox"/> EMT	<input type="checkbox"/> Truck Driver over 1.5 tons
<input type="checkbox"/> Dictaphone	<input type="checkbox"/> Surveying	<input type="checkbox"/> Backhoe-Loader
<input type="checkbox"/> Personal Computer	<input type="checkbox"/> Drafting	<input type="checkbox"/> Grader
<input type="checkbox"/> Word Processing	<input type="checkbox"/> Cartography	<input type="checkbox"/> Farm Tractor
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Photography	<input type="checkbox"/> Trencher
<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Construction Inspection	<input type="checkbox"/> Bulldozer
<input type="checkbox"/> Word Perfect Office	<input type="checkbox"/> Operate Radio	<input type="checkbox"/> Front End Loader
<input type="checkbox"/> Calculator		<input type="checkbox"/> Street Sweeper
<input type="checkbox"/> Filing	Driving Licenses	<input type="checkbox"/> Snow Plow
<input type="checkbox"/> General Accounting	<input type="checkbox"/> Driver's License	<input type="checkbox"/> Welding
<input type="checkbox"/> Bookkeeping	State _____	<input type="checkbox"/> Plumbing
<input type="checkbox"/> Payroll	Lic. # _____	<input type="checkbox"/> Electrical
<input type="checkbox"/> Microfilm	<input type="checkbox"/> Chauffeur's License	<input type="checkbox"/> Carpentry
	State _____	<input type="checkbox"/> Vehicle Mechanic
	Lic. # _____	<input type="checkbox"/> Concrete Work
		<input type="checkbox"/> Asphalt Work

Other Skills and/or Licenses:

Employment

Please give an accurate and complete full-time and part-time employment record. Start with present or most recent employer. Attach additional pages if necessary.

Company Name: _____

Address: _____

Name of Supervisor: _____

Telephone: _____ Employment From: _____ to _____

Reason for Leaving: _____

Job Title/Description of Work:

Company Name: _____

Address: _____

Name of Supervisor: _____

Telephone: _____ Employment From: _____ to _____

Reason for Leaving: _____

Job Title/Description of Work:

Company Name: _____

Address: _____

Name of Supervisor: _____

Telephone: _____ Employment From: _____ to _____

Reason for Leaving: _____

Job Title/Description of Work:

Company Name: _____

Address: _____

Name of Supervisor: _____

Telephone: _____ Employment From: _____ to _____

Reason for Leaving: _____

Job Title/Description of Work:

May we contact these employers?

Yes

No

If no, which employers do you request we not contact?

References

Give name, address and telephone numbers of three references who are not related to you and are not previous employers:

1. _____

2. _____

3. _____

Comments

State why you believe you are qualified to perform the kind of work for which you are applying:

"I hereby certify that the information given in this application is true and correct. I understand and agree that the County may research all statements and claims made on this application and make reference checks and that employment is contingent upon my passing a physical exam, which may include a drug screening test. I further understand that any misrepresentation or omission of facts upon this application, or failing the physical exam or drug test, will be sufficient cause for rejection or dismissal, if employed."

Signature

Date

Personnel Department Only

Required qualifications met?

Yes

No

Preferred qualifications detail: _____

Remarks:

Initial

Date