CUSTER COUNTY EMPLOYMENT APPLICATION

NAME:					
(Last)	(First)	(Middle)	(88	SN#)	
ADDRESS:					
(Street)	(City)	(State	;) ((Zip Code)	
Type Position Applying For:	Full Time	Part Time	Seasonal		
List any relative working for the	is County:				
	(Name)		(D	epartment)	
Following employment can yo other proof of U.S. Citizenship	1	cate or	Yes	No	
If not a U.S. Citizen, can you submit verification of your legal right to work permanently in the U.S.? Yes No					
Have you ever been convicted of a felony or been convicted of a misdemeanor resulting in imprisonment or a fine over \$500 during the last 10 years? (Conviction will not necessarily disqualify an applicant.)YesNo					
Were you previously employed	by this County or anot	ther			
government entity?			_Yes	No	
If you are a minor, please provi	de date of birth:		Age:		
EI	DUCATION AND 7	FRAINING			
High School		Graduated:	Yes	No	
College or University		Graduated:	Yes	No	
Trade School		Graduated:	Yes	No	
Apprentice School		Graduated:	Yes	No	
List any other education, training related to this employment:					
List any machines or equipmen	t that you are experienc	ed in and are qual	ified to opera	ite:	

Name of previous Employer:		Type of Business:			
Address:		Telephone No: ()		
Date Employed / From:	To:	Job Title:			
Name of Supervisor:		May we contact?			
Brief Description of Duties:					
Reason for leaving:					
Do you have a valid driver's licens	e in this state?	Yes No			
If yes, license number: License type:					
List any moving violations during the last five years:					
Circle Position(s) Applying For:	Courthouse Deputy Equipment Operator Other (Be Specific)				

APPLICANT'S CERTIFICATION

Please read carefully before signing. If you have any questions regarding the following statements, please ask for assistance.

I certify that, to the best of my knowledge and belief, the answers given by me to the foregoing questions and the statements made by me in this application are correct and complete. I understand that any false information contained in this application may result in my discharge.

I authorize you to communicate with all my former employers, school officials and persons named as references.

I understand that as this County deems necessary, I may be required to work hours outside a normally defined work day or work week. If employed, I understand and agree that such employment may be terminated at any time for any reason not prohibited by law and without any liability to me for any continuation of salary, wages, or employment related benefits (not required by law).

Signature:	Date:
Telephone:	Cell Phone:

Note: The filling out and returning of this application to Custer County does not guarantee employment and does not constitute an offer of employment.