

**KIOWA COUNTY COMMISSIONERS**

1305 Goff Street PO Box 100 Eads, CO 81036

**APPLICATION**

**We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.**

**(PLEASE TYPE OR PRINT)**

Position(s) Applied For:					Date of Application:	
Last Name		First Name		Middle Name		
Address: Number	Street	PO Box	City	State	Zip Code	
Telephone Number(s):			Dr. License #	State		

**If you are under 18 years of age, can you provide required proof of your eligibility to work?**  Yes  No

**Have you ever filed an application with us before?**  Yes  No

**Have you ever been employed with us before?**  Yes  No

**If Yes, give date of employment** \_\_\_\_\_

**Are you currently employed?**  Yes  No

**May we contact your present employer?**  Yes  No

**Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?**  Yes  No

**On what date would you be available for work?** \_\_\_\_\_

**Are you now Active Duty/Reservist in the Military?**  Yes  No

**Are you available to work:**  Full Time  Part Time  Temporary

**Are you currently on "lay-off" status and subject to recall?**  Yes  No

**Can you travel if a job requires it?**  Yes  No

**Have you been convicted of a felony in the last 7 years?**  Yes  No

**If Yes, please explain** \_\_\_\_\_

**Do you currently possess a CDL license?** \_\_\_\_\_ **Class A** \_\_\_\_\_ **Class B**

# EDUCATION

	<b>School Name &amp; Address</b>	<b>Course of Study</b>	<b>Years Completed</b>	<b>Diploma Degree</b>
<b>Elementary School</b>				
<b>Junior/High School</b>				
<b>Undergraduate College</b>				
<b>Graduate Professional</b>				
<b>Other (Specify)</b>				

**Describe any specialized training, apprenticeship, skills and extra-curricular activities.**


**Describe any job-related training received in the US military.**


**Indicate any foreign languages you can speak, read and/or write.**

		<b>Fluent</b>	<b>Good</b>	<b>Fair</b>
<b>Speak</b>				
<b>Read</b>				
<b>Write</b>				

# ADDITIONAL INFORMATION

## **Other Qualifications**

**Summarize special job-related skills and qualifications acquired from employment and other experience including specialized skills:**


## **List professional, trade, business or civic activities and offices held:**

**You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.**


**State any additional information you feel may be helpful to us in considering your application.**


**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

**Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities in such a job or occupation is attached. \_\_\_\_\_ YES \_\_\_\_\_ NO**

# EMPLOYMENT EXPERIENCE

Start with your present or last job. Include any job-related military service assignments & volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

<b>Employer</b>	<b>Dates Employed</b>		<b>Work Performed</b>
<b>Address</b>	<b>From:</b>	<b>To:</b>	
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b>		
<b>Job Title</b> <b>Supervisor</b>	<b>Starting</b>	<b>Final</b>	
<b>Reason for Leaving</b>			
<b>Employer</b>	<b>Dates Employed</b>		<b>Work Performed</b>
<b>Address</b>	<b>From:</b>	<b>To:</b>	
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b>		
<b>Job Title</b> <b>Supervisor</b>	<b>Starting</b>	<b>Final</b>	
<b>Reason for Leaving</b>			
<b>Employer</b>	<b>Dates Employed</b>		<b>Work Performed</b>
<b>Address</b>	<b>From:</b>	<b>To:</b>	
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b>		
<b>Job Title</b> <b>Supervisor</b>	<b>Starting</b>	<b>Final</b>	
<b>Reason for Leaving</b>			
<b>Employer</b>	<b>Dates Employed</b>		<b>Work Performed</b>
<b>Address</b>	<b>From:</b>	<b>To:</b>	
<b>Telephone Number(s)</b>	<b>Hourly Rate/Salary</b>		
<b>Job Title</b> <b>Supervisor</b>	<b>Starting</b>	<b>Final</b>	
<b>Reason for Leaving</b>			

# REFERENCES

**Business or Personal      No family members**

<b>Name:</b>	<b>Phone #:</b>
<b>Address:</b>	
<b>Name:</b>	<b>Phone #:</b>
<b>Address:</b>	
<b>Name:</b>	<b>Phone #:</b>
<b>Address:</b>	
<b>Name:</b>	<b>Phone #:</b>
<b>Address:</b>	

## APPLICANT'S STATEMENT

**I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.**

**This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.**

**I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an *"at will" nature*, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this *"at will"* employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.**

**In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.**

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

**WE ARE AN EQUAL OPPORTUNITY EMPLOYER**