

V. Employment History

Current/Most Recent Employer: _____

May we contact this employer: Yes _____ No _____

Employers Address: _____ City _____ State _____ Zip _____

Phone Number: _____ Supervisor Name & Title: _____

Employment Dates (mo/yr): From: _____ To: _____ Final Pay: _____

Job Title: _____ Reason for Leaving: _____

List duties performed and skills used while employed: _____

Employer: _____

Employers Address: _____ City _____ State _____ Zip _____

Phone Number: _____ Supervisor Name & Title: _____

Employment Dates (mo/yr): From: _____ To: _____ Final Pay: _____

Job Title: _____ Reason for Leaving: _____

List duties performed and skills used while employed: _____

Employer: _____

Employers Address: _____ City _____ State _____ Zip _____

Phone Number: _____ Supervisor Name & Title: _____

Employment Dates (mo/yr): From: _____ To: _____ Final Pay: _____

Job Title: _____ Reason for Leaving: _____

List duties performed and skills used while employed: _____

VI. Certification

I hereby certify that all statements in this application are true and I authorize investigation and verification of any of this material. I understand that any misstatement or omission of information will cause forfeiture of my eligibility for employment and will result in my removal from eligibility list or dismissal from County employment. I authorize the employers listed above to give any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing information. I authorize Scott County, through a selected vendor, to perform background and drug screening on myself. I further agree to furnish proof of eligibility to work in the United States. I understand that Scott County reserves the right to only notify those individuals selected for an interview as to the status of their application for employment.

Signature of Applicant: _____ Date: _____