## **BOURBON COUNTY FISCAL COURT**

## Application for Employment

Equal Opportunity Employer Pre-Employment Questionnaire

Personal Information	Date:		
NAME (Last name first)	SOCIAL SECURITY #		
PRESENT ADDRESS	CITY		
STATEZIP CODECELL PHONE #	НОМЕ #		
Employment Desired			
POSITIONDATE YOU	U CAN START		
ARE YOU EMPLOYED NOW YES NO IF SO, MAY W	WE INQUIRE OF YOUR PRESENT EMPLOYER	_YES NO	
EVER APPLIED TO THIS GOVERNMENT ENTITY BEFOREYES	NO WHEREWHEN		
EVER WORKED FOR THIS GOVERNMENT ENTITY BEFOREYES!	NO WHEREWHEN		
REASON FOR LEAVING			
REFERRED BY	<u> </u>		
EDUCATION HISTORY NAME & LOCATION OF SCHOOL	L YEARS DID YOU SUBJE ATTENDED GRADUATE	ECT STUDIED	
HIGH SCHOOL			
COLLEGE			
TRADE, BUSINESS, OR CORRESPONDENCE SCHOOL			
General Information			
SUBJECT OF SPECIAL STUDY/REASEARCH WORK			
SPECIAL TRAINING, CERTIFICATIONS, LICENSES			
SPECIAL SKILLS, FOREIGN LANGUAGES, ETC			
Military service record			
Have you ever served in the us armed forcesYESNO	Branch of Service		
Discharge Date	Rank	<del></del>	
CHECK SKILLS/EQUIPMENT OPERATED			
Bucket Truck NO	Have you ever driven a single axle truck?	YES	
Wheel Loader	Do you have a valid driver's license?	_YES NO	
n. d			

STATE ANY ADDITION	IAL INFORMATION	YOU FEEL MAY BE HELP	FUL TO US IN CONSIDE	ERING YOUR APPLICATION
Former Employer:	s			
Name of present or last	employer		Job Title	
Start Date	_ End Date	Reason for leaving		
Description of work			Telephone #	
Name of previous emplo	oyer		Job Title	
Start Date	_ End Date	Reason for leaving		
Description of work			Telephone #	
Name of previous emplo	oyer		Job Title	
Start Date	_ End Date	Reason for leaving		
Description of work			Telephone #	
References				
<u>Name</u>		<u>Telephone #</u>	Type of Business	How Long have you known them
<u>Name</u>		<u>Telephone #</u>	Type of Business	How Long have you known them
<u>Name</u>		<u>Telephone #</u>	<u>Type of Business</u>	How Long have you known them

## Special Purpose Questions

DATE

Signature

THEREBY INDICATING THAT THE INFORMATION IS REQUIRED FOR A BONA FIDE OCCUPATIONAL QUALIFICATION, OR DICTATED BY NATIONAL SECURITY LAWS, OR IS NEEDED FOR OTHER LEGALLY PERMISSIBLE REASONS. THE INFORMATION DISCLOSED WILL NOT BE USED TO DISCRIMINATE AGAINST THE APPLICANT DURING THE HIRING PROCESS FOR ANY REASONS RELATING TO RACE, COLOR, SEX, RELIGIOUS AFFILIATION, NATIONAL ORIGIN, GENDER, OR ANY DISABILITY.
X Have you ever been convicted of a felony: YES NO - Describe
This question is being asked because the job for which you are applying is considered a "security-sensitive" job, requiring a very high level of trust, such as any position in which the employee handles currency, has access to job-related computer terminal, has access to a master key, or works in an area which has been designated as a security-sensitive area. Answering yes to this question will not constitute an automatic rejection of employment. The date of the offense, the seriousness and nature of the violation, rehabilitation, and position applied for will all be considered. If your record was expunged, sealed, or set aside, you may answer "no" to the above question.
X I understand and agree that, in the event that I am offered a job, I may be required to take one or more: criminal background check; drug test, as a condition of hiring or continued employment. I agree to consent to take such test (s) at such time as designated by the Fiscal Court and to release the Fiscal Court, its, elected officials, agents or employees from any claim arising in connection with the use of such test(s), other than claims related to privacy violations and/or discrimination under applicable federal and state laws. I understand that all potential employees are required to take a drug test and that, in compliance with federal law, the records of such tests will be kept confidential and the information obtained will not be used to discriminate on the basis of disability, health problems, or medical conditions YES NO
Authorization
"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.
I authorize investigation of all statements contained herein and the references and employees listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the Fiscal Court from all liability for any damage that my result from utilization of such information.
I also understand and agree that no representative of the Fiscal Court has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized Fiscal Court representative.
I understand that a consumer credit report or criminal records check may be necessary prior to my employment. If such reports are required, I understand that, in compliance with federal law, the company will provide me with a written notice regarding the use of these reports and will also obtain a separate written authorization from me to consent to these reports. I also understand that a poor credit history or conviction will not automatically result in disqualification from employment."
This waiver does not permit the release or use of disability-related or medical information in a manner prohibited by the Americans with Disabilities Act (ADA) and other relevant federal and state laws.
In compliance with federal law, all persons hired will be required to verify identity and eligibility to work in the United States and to complete the required employment eligibility verification document form upon hire.

DO NOT ANSWER ANY OF THE QUESTIONS IN THIS BOX UNLESS THE EMPLOYER HAS CHECKED THE BOX PRECEDING A QUESTION,