



EMPLOYMENT APPLICATION

Fill out Completely.

Engineer's Office:

13522 Washington Road, West Burlington, IA 52655

| | | | |
|-----------------------|-------|-----------------------------|---------------------|
| Date: | | Email Address: If available | |
| Position Applied For: | | | |
| Name: Last | First | Middle | Social Security No. |
| Address: No. & Street | | City | State |
| | | Zip Code | Message: Name/Phone |
| | | | Home Phone No. |
| | | | Cell Phone No. |

EDUCATION:

Cite Specialized Training Other Than Formal Education On Reverse Side

| | | | |
|----------------------|-----------------------|--|---|
| High School | Name of School: | Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/> | G. E. D.: Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | Address: No. & Street | | Vocational Program |
| | | City | State |
| | | Zip Code | |
| College | Name of College: | Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/> | Degree: |
| | Address: No. & Street | | Major: |
| | | City | State |
| | | Zip Code | |
| Other Schools | Name of Institution: | Graduated: Yes <input type="checkbox"/> No <input type="checkbox"/> | Degree or Certificate |
| | Address: No. & Street | | Major/Type of Program |
| | | City | State |
| | | Zip Code | |

EMPLOYMENT HISTORY: List ALL Positions Held In Reverse Order, Present (or most recent) Job First

| | | | | |
|---|-----------------------|----------|------------------------------------|-------|
| Present Job Date of Hire: Mo/Day/Yr | Name of Employer: | | Type of business: | |
| | Address: No. & Street | | City | State |
| | | Zip Code | Company Phone No. | |
| Your Position | Nature of Duties: | | | |
| Final Salary | Supervisors Name: | Title: | Reason for Seeking New Employment: | |
| Previous Job Date of Hire: Mo/Day/Yr Final Date: Mo/Day/Yr | Name of Employer: | | Type of Business: | |
| | Address: No. & Street | | City | State |
| | | Zip Code | Company Phone No. | |
| Your Position | Nature of Duties: | | | |
| Final Salary | Supervisors Name: | Title: | Reason for Seeking New Employment: | |
| Previous Job Date of Hire: Mo/Day/Yr Final Date: Mo/Day/Yr | Name of Employer: | | Type of Business: | |
| | Address: No. & Street | | City | State |
| | | Zip Code | Company Phone No. | |
| Your Position | Nature of Duties: | | | |
| Final Salary | Supervisors Name: | Title: | Reason for Seeking New Employment: | |

| | | | | |
|---|--------------------------|-------------------|------------------------------------|-------|
| Previous Job Date of Hire: Mo/Day/Yr Final Date: Mo/Day/Yr | Name of Employer: | | Type of Business: | |
| | Address: No. & Street | | City | State |
| | | Company Phone No. | | |
| Your Position | Nature of Duties: | | | |
| Final Salary | Supervisors Name: Title: | | Reason for Seeking New Employment: | |
| Previous Job Date of Hire: Mo/Day/Yr Final Date: Mo/Day/Yr | Name of Employer: | | Type of Business: | |
| | Address: No. & Street | | City | State |
| | | Company Phone No. | | |
| Your Position | Nature of Duties: | | | |
| Final Salary | Supervisors Name: Title: | | Reason for Seeking New Employment: | |

OTHER INFORMATION

| | | | |
|--|--|--|--|
| Military | Branch: | Rank: | Duties: |
| Qualifications And Skills | Describe any equipment extensively operated by your (Office, Construction, Trucks, etc) | | |
| | Current License: <input type="checkbox"/> Driver <input type="checkbox"/> Commercial Driver License <input type="checkbox"/> Chauffer <input type="checkbox"/> None | | License ever suspended or revoked? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| | State: No: | Date: | Reason: |
| Ever convicted of a crime (except minor traffic violations)? Dates: Offenses: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Ever collected money or bonded? Yes <input type="checkbox"/> No <input type="checkbox"/> | For whom: |
| List any specialized training, certificates or achievements: | | | |
| How did you hear about this employment opportunity? | | | |
| Do you have any relatives or friends currently employed by the County? Yes <input type="checkbox"/> (List names) No <input type="checkbox"/> | | | |
| Have you reviewed the job description or posting for the position sought? | | | |

REFERENCES: (List three (Local area residents, if available))

| | | |
|-------|----------|--------|
| Name: | Address: | Phone: |
| Name: | Address: | Phone: |
| Name: | Address: | Phone: |

Des Moines County, Iowa does not discriminate on the basis of race, color, national origin, sex, sexual orientation, gender identity, Religion, age, or disability in employment or provision of services.

I hereby certify that the answers given and statements made by me on this Employment Application are true and correct and that there are no material omissions. I authorize my present and former employers to give County officials any information regarding me or my performance and release such employers, including their representatives and their companies, from all liability from damage for providing requested information. I understand that should an investigation disclose misrepresentation or falsification, I will be dismissed immediately, my application will be rejected and I will be disqualified from making future application with the County.

I understand that any employment offered by the County is "employment at will" and I may be terminated for any reason not violation of law (or a collective bargaining agreement where applicable). I understand my driving and any criminal records my be checked and I agree to submit to a pre-employment physical examination, if required, at County expense following a conditional offer of employment. I also understand that Des Moines County, Iowa has a strict policy against illegal drug involvement by employees that can result in immediate disqualification or dismissal from employment for such illicit activities occurring on or off the job, and I may be subject to random drug testing. I also understand the County strictly enforces the Iowa Smoke-free Air Act and employees violating said Act are subject to discipline, up to and including discharge.

Read the Above Statement Carefully! **Date:** _____ **Signature of Applicant:** _____