County of Taney, Missouri

AND COURT

Employment Application

Human Resources 132 David Street PO Box 703 Forsyth, MO 65653

Ph: 417-546-7237

Fax: 417-546-8900

Please inform us if you require assistance in filling out an application or taking a pre-employment test. Individuals with disabilities should request reasonable accommodations in accordance with the Americans with Disabilities Act prior to testing or appointment.

APPLICATION FOR EMPLOYMENT						
Instructions to applicant: Please t	type or print legibly and co	mplete a	II pages	of this application. Please sign the		
last page. Resumes and other ma	terials may be attached.					
Position(s) desired: 1)	2)			3)		
Date Available:	Employment de	sired: Fu	ull-time (O Part-time O Temporary O		
Days/Hours Available for work:						
PERSONAL INFORMATION						
Name (Last, First, Middle)			Social Security Number: Last 4 digits ONLY			
Mailing Address (Street, City, Cou	nty, State, Zip Code)					
Home Phone #:	Cell #: Em	nail Addr	ess:			
Are you legally permitted to work	in the United States?	Yes	O No	0		
(Proof of U.S. Citizenship or Immigration status will be required upon unemployment).						
Do you have any relative(s) that w	ork for Taney County?	Yes	O No	00		
If yes, please list						
Name	Relationship		Departn	nent		
		,				
Have you ever been employed wi	th Taney County before?		Yes O	No O		
Are you currently employed?			Yes O	No O		
Have you ever been known by another name(s)? Yes O No O				No O		
If yes, please give name(s):						
Have you ever pled guilty or "no o	ontest" to, or been convict	ted of a	serious n	nisdemeanor or felony?		
			Yes O	No O		
If yes, list complete conviction record on the back of this sheet - use additional sheets, if necessary.						
Please give full details, including dates, type of offense, location, etc.						
Answering "Yes" to these questions does not constitute an automatic bar to employment. Factors such as age and						
time of the offense, seriousness and nature of the violation, and rehabilitation will be taken into account. In						
answering these questions, do not include the following: (1) minor traffic infractions; (2) convictions for which the						
record has been sealed or expunged.	record has been sealed or expunged.					

with your present or most recent position and list each position in the month or more. If the vacancy announcement includes an experience more space is need attach separate sheet(s) to this application.				
Employer	Dates of Employment			
. ,	Start Date	End Date		
May we contact employer? Yes O No O	Starting Salary	Final Salary		
Address				
Phone Number	Reason for leaving			
Your Job Title	Supervisor's Name and Title			
Description of Duties				
Employer	<u>Dates of Er</u>	nployment		
	Start Date	End Date		
May we contact employer? Yes \(\) No \(\)	Starting Salary	Final Salary		
Address				
Phone Number	Reason for leaving			
Your Job Title	Supervisor's Name and Title			
Description of Duties				
Employer	<u>Dates of Employment</u> Start Date End Date			
May we contact employer? Yes \(\cap \) No \(\cap \)	Starting Salary	Final Salary		
Address				
Phone Number	Reason for leaving			
Your Job Title	Supervisor's Name and Title			
Description of Duties				
Employer	<u>Dates of Employment</u>			
	Start Date	End Date		
May we contact employer? Yes \(\cap \) No \(\cap \)	Starting Salary	Final Salary		
Address				
Phone Number	Reason for leaving			
Your Job Title	Supervisor's Name and Ti	tle		
Description of Duties				

In the space below list your complete record of employment for the past TEN years and any other relevant work/volunteer experience. Start

EMPLOYMENT EXPERIENCE

EDUCATION AN	ID TRAIN	ING				
Please complete all appropriate items. To receive credit for college education, you must submit a copy						ou must submit a copy
of your transcrip	ot(s).					
Type of School	Name a	nd location of school	Deg	ree and/or C	redit Hours	Majors/Minors
High School						
High School		Did you graduate or o	obtair	n equivalency	/ diploma (GED)? Yes ○ No ○
Vocational Scho	ool	- · · · · · · · · · · · · · · · · · · ·				,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
College or Unive	ersity					
Graduate Schoo	ol					
Other Training (Explain)					
0,	. ,					
PROFESSIONAL	INFORM	ATION (if applicable)				
						es that you currently hold
1 , .		•	cle op	erator licens	se, CDL etc. , if	it is a requirement of the
position for whi	ch you ha	ave applied.)				
License or Certification Held: Licensin			Licensing S	ng State and/or Agency:		
LAW ENFORCEM						
Are you a United States citizen? Yes No						
Please attach the following information, which is a requirement for Missouri POST Certification: Proof of U.S. Citizenship						
Missouri Peace Officer Certification						
A copy of your High School Diploma, GED or college diploma or transcript						
List below any information concerning military duty, if any:						
Branch of Servi		Type of I		<u>-</u>	Dat	es of Service:
ROAD AND BRI						
Do you have a (es 🔾	No 🔾		
Please attach the following information: A copy of your CDL License						
Асор	y or your	CDL License				
ADDITIONAL Q	UALIFICA [*]	TIONS				
Please list any other knowledge, special technical or computer skills, and/or individual capabilities not						
previously listed that would especially prepare you for the position for which you have applied?						

PERSONAL REFERENCES					
Please list the names of three per	sons who are not relate	ed to you and not previously listed a	as a current or former		
supervisor that we may contact for	or a personal reference.				
Name	Phone	Email Address	Years Known		
CERTIFICATION OF APPLICANT AN	ND AUTHORIZATION FO	OR RELEASE OF INFORMATION			
		ure indicates that you fully underst	tand and agree to the		
provisions of each statement.	carejuny . Tour signat	are maleutes that you rany anders	tand and agree to the		
Name:		Social Security Number: Last 4 digits ONLY			
		I nd complete to the best of my knowledge. ation and/or termination of employment if	-		
for any reason, with or withot cause or no	otice. I further understand a	arily entered into, and employees are free nd agree that the County or any elected of or without cause or notice. This is not a cor	ficial thereof, may terminate		
It is further understood and agreed that should my employment with Taney County be terminated for any reason, my final pay will not be received until I have submitted all necessary paperwork and returned any and all property assigned to me during the course of my employment, including but not limited to all keys, uniforms, equipment, and County-issued identification.					
In consideration of my employment, I agr	ee to conform to the policies	s, procedures, and regulations of Taney Co	unty.		
former employers, and personal reference	es from any liability for dama	nvestigation in respect to my application an age caused by giving and receiving informa employers and/or personal references will	tion or opinions as to my		
felony, misdemeanor and traffic violation	s, and agree to hold Taney C	n which pertains to records of convictions founty harmless and in no event shall Taney ent due to information obtained during my	y County be liable to me for		
I further understand that any offer of empthe the position, police record checks, backgr		n the results of reference checks, drug test physical exams.	ing, and if a requirement of		
Applicant Signature:		Date:			