## **Lauderdale County Application for Employment**

## We are an Equal Opportunity Employer

The application must be fully completed to be considered. Please complete each section, even if you include a resume. Please print or write clearly.

Position						
			Available Start Date			
Type of Employment	t	_				
Full-Tim	ne	Part-Tim	е	Tem	porary	
Personal Inform	nation		-			
Name						
Address		City	St	ate	Zip	
Phone Number	Mobil	e Number	Number Email Address			
	•				Yes	No
Are you over the age of 18	3?					
Have you ever been empl	oyed by us? If s	o, give date.				
Do you have any relatives	employed by u	s? If so, give name a	nd depar	tment.		
Are you a resident of Lauc	derdale County?	,				
Do you have a valid Drive	r License? If so,	please list the type.				
Education						
School	Sch	ool Name		Years Attended	Major/Minor	
High School						
College						

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Please read carefully. In the areas below, please list all of your work experience, beginning with your most recent job. It is very important that you provide accurate information about each employer, your job duties, and accurate dates of employment. We will not consider job experience that does not contain the required information. If more space is needed, please attach extra copies to your application.

Name of Employer	Dates Employed (MM/YY)	Ending Pay
· · ·	From: / To: /	
Address	Job Duties	
Phone Number		
Supervisor	Other Notes	
Job Title		
Reason for Leaving		
Name of Employer	Dates Employed (MM/YY)	Ending Pay
ruanic or aniproye.	From: / To: /	
Address	Job Duties	•
Phone Number	1	
Supervisor	Other Notes	
Job Title		
Reason for Leaving		
Name of Employer	Dates Employed (MM/YY)	Ending Pay
. ,	From: / To: /	,
Address	Job Duties	
Phone Number		
Supervisor	Other Notes	
Job Title		
Reason for Leaving		

References	Please list three people not related to you.				
Name	Title/Position	Company	Phone		
Additional Applicant	Comments				
Additional Applicant	Comments				
Discrimination against any person		- ·			
discipline, or any other aspect of paffiliations or because of race, nat					
Discrimination on the basis of age	or sex or physical disability is pro	hibited except where s	specific age, sex, or		
physical requirements constitute administration.	a bona fide occupational qualifica	tion necessary to prop	er and efficient		
Laffirm that the information provi	ided by me in this Application for	Employment is true co	arrect and complete I		
I affirm that the information provided by me in this Application for Employment is true, correct, and complete. I also agree that any misstatement or omission of facts that is deemed significant by the Human Resources					
Department will disqualify me for	the position, or may qualify for di	smissal if employment	t has begun.		
I understand that after a job offer		g work, I may be requi	red to undergo a pre-		
employment drug screening and p	ohysical examination.				
I waive my Privacy Rights as to the above listed employers and references and understand that I may be subject					
to, depending on the position applied for, a background check of my motor vehicle record, credit, or criminal and civil history, along with prior work history and personal references. No offer of employment creates a					
contractual agreement between r	ne and Lauderdale County.				
I agree that my signature (electro		~			
and agree that by submitting this signature on this application.	signature electronically, I waive al	I rights to dispute the	validity of my		
I certify that I have read, fully und	erstand, and accept all terms of th	nis employment applica	ation.		
Signature		Date			