

Please print in ink or use typewriter
Number of attachments _____
Announcement number _____

County Admin. Office
P.O. Box 570
Wise, VA 24293-0570

Wise County, of Virginia

An Equal Opportunity Employer

Application for Employment

Employees of Wise County and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, national origin, handicap, sex or age.

1. Social Security Number _____ 2. Position applied for _____
(one per application)
3. Full legal name _____
Last First Middle
4. Address _____
Number and Street _____
City State Zip
5. Home Phone _____
6. Business Phone _____
7. Date of Birth _____

NOTE: The Age Discrimination in Employment Act of 1967 as amended prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

8. EDUCATION

- a. Circle highest grade completed 1 2 3 4 5 6 7 8 9 10 11 12
- b. Name and location of last primary or secondary school attended _____
- c. If you did not complete high school, do you have a high school equivalency diploma? ____ Yes ____ No
- d. Circle number of years of post high school education 1 2 3 4 5 6 7
- | Name and Location of Institution | Hrs | Degree | Major or Specialty | Minor |
|----------------------------------|-------|--------|--------------------|-------|
| 1. _____ | _____ | _____ | _____ | _____ |
| 2. _____ | _____ | _____ | _____ | _____ |
| 3. _____ | _____ | _____ | _____ | _____ |
- e. If you expect to complete your educational program in the near future, please indicate what type of degree and when you expect to receive it. _____

9. EXPERIENCE

Please describe all paid, military and applicable voluntary experience starting with the most recent. You may list significantly different jobs within the same organization as separate items. If you need additional space please use a supplementary experience form. May we contact your present supervisor? ____ Yes ____ No

- a. Job Title _____ Duties _____
Employer _____
Address _____
Phone _____
Type of business _____
Immediate supervisor _____ Title _____
Salary (start) _____ (finish) _____
Dates from _____ to _____
Number and type of employees supervised _____
Equipment used _____
Reason for leaving _____
Name if different from present _____
- b. Job Title _____ Duties _____
Employer _____
Address _____
Phone _____
Type of business _____
Immediate supervisor _____ Title _____
Salary (start) _____ (finish) _____
Dates from _____ to _____
Number and type of employees supervised _____
Equipment used _____
Reason for leaving _____
Name if different from present _____
- c. Job Title _____ Duties _____
Employer _____
Address _____
Phone _____
Type of business _____
Immediate supervisor _____ Title _____
Salary (start) _____ (finish) _____
Dates from _____ to _____
Number and type of employees supervised _____
Equipment used _____
Reason for leaving _____
Name if different from present _____

d. Job Title _____ Duties _____
 Employer _____
 Address _____
 _____ Phone _____
 Type of business _____
 Immediate supervisor _____ Number and type of employees supervised _____
 Title _____ Equipment used _____
 Salary (start) _____ (finish) _____ Reason for leaving _____
 Dates from _____ to _____ Name if different from present _____

e. Use this space for any additional information you think would help us evaluate your application, including training, seminars, workshops or special achievements. _____

f. Typing speed _____ words per minute. Shorthand speed _____ words per minute.

g. License (other than driver's), certificate or other authorization to practice a trade or profession.

Type	License Number	Expiration Date	Granted by (licensing board)

10. REFERENCES

List names and addresses of three persons not related to you who know your qualifications:

Name _____ Address _____ Phone _____
 Name _____ Address _____ Phone _____
 Name _____ Address _____ Phone _____

11. MISCELLANEOUS

- a. Are you willing to accept employment which requires you to travel?
 ____ Yes, during the day only.
 ____ Yes, occasionally overnight only.
 ____ Yes, both during the day and occasionally overnight.
 ____ No, I will not travel.

b. Are you willing to work: ____ during the day only, ____ any shift other than day, ____ any shift?

c. List the locations in which you are willing to work. If you are willing to work anywhere in Wise County, write all:

Are you willing to provide your own transportation if necessary for your employment? ____ Yes ____ No
 Will you accept employment which is (check one): ____ permanent, ____ temporary, ____ either permanent or temporary?
 Will you accept employment which is (check one): ____ full time, ____ part time, ____ either full or part time?

d. For purposes of compliance with Section 40.1-11.1 of the Code of Virginia, entitled "Employment of Illegal Immigrants," are you legally eligible for employment in the United States? ____ Yes ____ No. (You are legally eligible for employment if you are a United States citizen or if you have an appropriate permit to work in the United States issued by the U.S. Department of Justice or U.S. Department of Labor.)

e. Have you ever been convicted of a law violation, including moving traffic violations but excluding offenses committed before your eighteenth birthday which were finally adjudicated in a juvenile court or under a youth offender law? ____ Yes ____ No If yes, please explain _____

12. When will you be available to start work? (No date is necessary if you are available as soon as you give adequate notice.) ____ Month ____ Day ____ Year

13. How did you find out about this employment opportunity? ____ Newspaper, ____ Radio-TV, ____ VEC, friend, ____

14. CERTIFICATION

I hereby certify that all entries on both sides and all attachments are true. I understand that all information on this application is subject to verification and I consent to references and former employers being contacted regarding this application.

Date _____ Applicant Signature _____

PLEASE READ CAREFULLY
APPLICANT'S CERTIFICATION AND AGREEMENT

I certify that the facts set forth in the Employment Application are true and complete to the best of my knowledge. I understand that if I am employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit through inquiry of individuals or any investigative or credit agencies or bureaus of your choice.

However, I will be advised if an investigative report is obtained, and my financial and credit record will not be used as a basis for not employing me.

Effective April 29, 2004, all new hires, both full and part-time, must utilize direct deposit for payroll purposes. This is a condition of employment. Failure to abide by it will result in your rejection or termination. Please be aware of this requirement and act accordingly.

DATE: _____ SIGNATURE OF APPLICANT: _____