APPLICATION FOR EMPLOYMENT

JIM LUERSEN CAMPBELL COUNTY CLERK 1098 MONMOUTH ST. NEWPORT, KY 41071

PERSONAL INFORMATION:

NAME:			
LAST	FIRST		MIDDLE INITIAL
PRESENT ADDRESS:	T CITY	STATE	ZIP
SOCIAL SECURITY NUMBER:			IBER:
Are you a Campbell County Resident?	YesNo		
Have you worked for us before Yeshold?	,		d what type of position did you
How did you learn of this opening?			
Reason for interest in this job?			
Are there any experiences, skills or qu you are applying? If so, please describ	-		
Do you have a valid Driver's License? \ Do you own a car? YesNo If	resNo If yes, give li	cense number _	
Are you a U.S. Citizen? YesNo			
Have you ever been convicted of a feld			
Have you ever been disciplined or fire	d? YesNo If yes, pla	ease explain	
Name of person to be notified in case	of emergency:		
Address:		Phone Nur	nber:
JOB REQUIREMENTS:			
Title of position for which you are app	lying:		
Do you want to work: Full-time	_ Part-time Temporar	y Season	al
Minimum salary required:	When car	n vou begin to w	ork:

WORK HISTORY:

Begin with your present or most recent job and end with your least recent job.

Employer: Employed from: To: Title of position: Starting Salary: Ending Salary: Address of employer: Name of supervisor: Reason for leaving:	
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Employer: Employed from: To: Title of position: Starting Salary: Ending Salary: Address of employer: Name of supervisor: Reason for leaving:	
Employer: Employed from: To: Title of position: Starting Salary: Ending Salary: Address of employer: Name of supervisor: Reason for leaving:	

If more space is needed please attach additional sheets.

EDUCATION AND TRAINING:

Elementary School		Location:		
Elementary School Highest grade completed		Attended from	(year) to	(year)
High School		Location:		
Highest grade completed		Attended from	(year) to	(year
Did you graduate or receive a				
What was your course of study?_				
College		Location:		
CollegeAttended from	_(mo./yr.) to	(mo./yr.)	Did you graduate? Yes_	No
Year or anticipated year of gra				
What were your major and mino				
College		Location:		
Attended from	(mo./yr.) to	 (mo./yr.)	Did you graduate? Yes	No
Year or anticipated year of gra	duation	Give degree	, or credit hrs received	
What were your major and mino				
Vocational or Other School:		Location:		
Attended from	(mo./vr.) to	(mo./vr.)	Did you graduate? Yes	No
Year or anticipated year of gra				
If you have a special license or ce Describe any special skills or made				
MILITARY SERVICE RECOR Have you ever served in the armore Dates of duty: From: To What were your duties?	ed forces? Yes o: Rank at	: Discharge:		
Describe any special training whi				
CHARACTER REFERENCES Give the names of three persons Name	not related to you,		· · · · · · · · · · · · · · · · · · ·	
Address			Dusiliess i liulie	
Name	Н	ome Phone	Business Phone	
Address				
Name	H	ome Phone	Business Phone	
Address			 	

ADDITIONAL INFORMATION:

Occasionally, the form of an application blank makes it difficult for an individual to adequately summariz his/her background. Use the space to summarize additional information you feel is necessary to describ your full qualifications. Your personal interests such as hobbies, civic involvement, etc., may be as helpful a educational background and work experience. If more space is need, please attached additional sheets.
CERTIFICATION:
I understand that the successful passing of a medical examination may be a condition of my employment. certify that the above information is correct and complete to the best of my knowledge and belief. I understan that misrepresentation, falsification, or omission of material fact may be cause for rejection of my applicatio or for termination after employment. I understand and agree the statements made in this application may b subject to verification concerning same, and I hereby release any such person from any and all liability for an damage whatsoever incurred in the furnishing such information.
Signature: Date: