



# County of Taney, Missouri

## Employment Application

Human Resources  
 132 David Street  
 PO Box 703  
 Forsyth, MO 65653  
 Phone: 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.*

<b>APPLICATION FOR EMPLOYMENT</b>			
Instructions to applicant: Please type or print legibly and complete all pages of this application. Please sign the last page. Resumes and other materials may be attached.			
<b>Departments Interested In:</b>			
<input type="checkbox"/> 911 Administration <input type="checkbox"/> Admin Services <input type="checkbox"/> Airport <input type="checkbox"/> Assessor <input type="checkbox"/> Auditor <input type="checkbox"/> Building & Grounds <input type="checkbox"/> Collector	<input type="checkbox"/> Coroner <input type="checkbox"/> County Clerk <input type="checkbox"/> Emergency Management <input type="checkbox"/> Human Resources <input type="checkbox"/> Information Technology <input type="checkbox"/> Juvenile <input type="checkbox"/> Planning & Zoning	<input type="checkbox"/> Prosecutor <input type="checkbox"/> Public Admin <input type="checkbox"/> Recorder <input type="checkbox"/> Road & Bridge <input type="checkbox"/> Sheriff Department <input type="checkbox"/> Treasurer <input type="checkbox"/> University Extension	
<b>Type of Position Interested In (Clerical, IT, Equipment Operator, etc)</b>			
Date Available:		Employment Desired: <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time <input type="checkbox"/> Temporary	
Days/ Hours Available for Work:			
<b>PERSONAL INFORMATION:</b>			
Name (Last, First, Middle)			SSN (last 4 digits only)
<b>Mailing Address (Street, City, County, State, Zip Code)</b>			
<b>Home #:</b>	<b>Cell #:</b>	<b>Email Address:</b>	
Are you legally permitted to work in the United States? (Proof of U.S. Citizenship or Immigration status will be required upon employment.)			<b>Yes   No</b>
Are you currently employed?			<b>Yes   No</b>
Have you ever been employed with Taney County before?			<b>Yes   No</b>
Have you ever been known by another name(s)? If yes, please give names:			<b>Yes   No</b>
Do you have any relative(s) that work for Taney County? If yes, please list:			<b>Yes   No</b>
Name	Relationship	Department	
Have you ever pled guilty or "no contest" to, or been convicted of, a serious misdemeanor or felony? If yes, list complete conviction record.			<b>Yes   No</b>

*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.*

Taney County is an Equal Employment Opportunity Employer and a Drug Free Facility which requires Drug and Alcohol Testing.

**EMPLOYMENT EXPERIENCE**

In the space below list your complete record of employment for the past TEN years and any other relevant work/volunteer experience. Start with your present or most recent position and list each position in the order that you held them. List any periods of unemployment of one month or more. If the vacancy announcement includes an experience requirement, be sure to show clearly that you meet such requirements. If more space is needed attach separate sheet(s) to this application.

Employer			Dates Of Employment	
			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			Dates Of Employment	
			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			Dates Of Employment	
			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			Dates Of Employment	
			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			Dates Of Employment	
			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:				

<b>EDUCATION AND TRAINING</b>			
<i>Please complete all appropriate items. To receive credit for college education, you must submit a copy of your transcript.</i>			
Type of School	Name and Location of School	Degree and/ or Credit Hours	Majors/ Minors
High School	Did you graduate or obtain equivalency diploma (GED)?      Yes      No		
Vocational School			
College or University			
Graduate School			
Other Training (Explain)			

<b>PROFESSIONAL INFORMATION (if applicable)</b>	
Please list any professional, paraprofessional, or technical certificates or licenses that you currently hold (include peace officer certification, motor vehicle operator license, CDLetc., if it is a requirement of the position for which you have applied.)	
<b>License or Certification Held:</b>	<b>Licensing State and/ or Agency:</b>

<b>LAW ENFORCEMENT APPLICANTS ONLY</b>		
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		
<b>List below any information concerning military duty, if any:</b>		
Branch of Service:	Type of Discharge:	Dates of Service:

<b>ROAD AND BRIDGE APPLICANTS ONLY</b>	
Do you have a CDL license?      Yes      No	
Please attach the following information: A copy of your CDL license	

<b>ADDITIONAL QUALIFICATIONS</b>
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 persons who are not related to you and not previously listed as a current or former supervisor that we may contact for a personal reference.

Name:	Phone	Email Address:	Years Known:

**CERTIFICATION OF APPLICANT AND AUTHORIZATION FOR RELEASE OF INFORMATION**

Please read the statements below *carefully*. Your signature indicates that you fully understand and agree to the provisions of each statement.

Name:	Social Security Number: <b>Last 4 digits ONLY</b>
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I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that any false or inaccurate information could result in disqualification of this application and/or termination of employment if I have been employed.

I understand and agree that employment with Taney County is voluntarily entered into, and employees are free to resign at will at any time, for any reason, with or without cause or notice. I further understand and agree that the County or any elected official thereof, may terminate the employment relationship at will at any time for any reason, with or without cause or notice. This is not a contract for employment.

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 agree to conform to the policies, procedures, and regulations of Taney County.

I, the undersigned, do hereby authorize Taney County to conduct an investigation in respect to my application and release the County, my former employers, and personal references from any liability for damage caused by giving and receiving information or opinions as to my employment or character. Any information obtained through former employers and/or personal references will become the property of Taney County.

I, the undersigned, do hereby authorize the release of any information which pertains to records of convictions for law violations, including felony, misdemeanor and traffic violations, and agree to hold Taney County harmless and in no event shall Taney County be liable to me for special, indirect or consequential damages for the refusal of employment due to information obtained during my police record check.

I further understand that any offer of employment is conditioned upon the results of reference checks, drug testing, and if a requirement of the position, police record checks, background checks, and post-offer physical exams.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_