

WORK HISTORY: Start with your present or most recent job. List self-employment, internship, summer and part-time jobs. Continue on separate sheet(s) if necessary.

1	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

2	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

3	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

4	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

May we contact the above for reference checking purposes? _____

Please identify by number any employer you do not wish us to contact _____

Is there any type of work which your physical or mental condition prohibits, or have you ever been advised by a physician not to perform certain types of work? If so, please explain: _____

Convictions: Have you ever been convicted of an offense other than a minor traffic violation? If so, please explain. _____

5	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

6	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

7	Company	Address		Telephone
Date Employed:	From	To	Starting Salary:	Ending
Job Title & Duties				Supervisor
				Specific Reason for Leaving

OFFICE EQUIPMENT (For Office Positions Only): List the office equipment you can operate (such as computer, calculator, dictaphone, and word processing, etc.)

OTHER (optional): Use the space below to describe your interest in the position and the skills and aptitudes that you feel qualify you for this position. Job-related associations, special job-related training or skills and the like may be listed here. If you need more space, please continue on a separate sheet.

REFERENCES: Please list the names, addresses and phone numbers of three work-related references who have definite knowledge of your qualifications, skills and abilities to perform the position you are applying for.

FOR TEMPORARY/SEASONAL APPLICANTS ONLY

I understand I am applying for a temporary position and will be expected to work as needed. I understand my employment will not exceed six months and that my employment is subject to this time frame only.

Date

Signature of Applicant

LAW ENFORCEMENT APPLICANTS ONLY

44-08-20.1 Law enforcement officer job application.

Every applicant for a position as a law enforcement officer for any state or political subdivision agency must be asked in any written application for that position whether that applicant has ever pled or been found guilty of a felony including a felony charge that was later dismissed under a deferred imposition of sentence.

I acknowledge that I have read and understand the above statute and certify that I have never pled or been found guilty of a felony including a felony charge that was later dismissed under a deferred imposition of sentence.

Date

Signature of Applicant

CERTIFICATE AND RELEASE INFORMATION

I certify that the information contained in this application is correct to the best of my knowledge and understand that falsification of this information is grounds for dismissal. I also understand that the County retains the right to terminate an employee at any time for any reason, with or without cause, in accordance with the Personnel Policies of Cass County.

AUTHORITY FOR RELEASE OF INFORMATION

I have completed this application with the knowledge and understanding that any or all items and answers which I have provided may be subject to investigation by Cass County. I hereby consent to the release of information requested by Cass County from any and all educational institutions, law enforcement agencies, current and former employers, and other listed references.

I acknowledge that I have read and understand the above agreement.

Applicant's Signature

Date

Applicant's Driver's License Number

State of Issuance