

Logan County Engineer

# **APPLICATION FOR EMPLOYMENT**

#### **Equal Opportunity Policy**

The Logan County Engineer provides equal employment opportunities to all employees and qualified applicants for employment and prohibits discrimination and harassment of any type without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, disability status, genetics, protected veteran status, or any other characteristic protected by federal, state or local laws. This policy applies to all terms and conditions of employment, including recruiting, hiring, placement, promotion, termination, layoff, recall, transfer, leave of absence, compensation and training.

**NOTE TO APPLICANT:** Please complete this application by typing or printing in ink. The application form must be completed in its entirety and signed to be considered for employment. Incomplete information could disqualify you from further consideration. Resumes will not be accepted in lieu of the application. This application form will become public record upon submission to Logan County.

PERSONAL INFORMATION							
Legal First Name:	MI:	Lega	l Last Name:			Social	Security Number:
Street Address:		City:			State	:	Zip:
Phone Number:	E	Email Addr	ess:				
Driver's License Number:			State:	Ex	piratic	n Date:	·
		$2 \Box V_{22}$			^		
Do you have a Commercial Driver's Li Any Endorsements?	Icense	er 🗆 res			ass A		ass B
Are you 18years of age or over?	es _	] NO	Are you legal	ly eligible to v	vork in	the U.S	5? 🗌 Yes 📋 No
If you are not a resident of Logan Cou	inty, a	re you wil	ling to relocate?	? 🗌 Yes 🗌	No		
	•		-				
Have you applied with our organization before? 🗌 Yes 🗌 No If yes, list dates:							
Have you been employed by Logan County, the State or another governmental agency before? 🗌 Yes 🗌 No							
If yes, please list the department, job title and dates of employment:							
Do any of your relatives or friends work for Logan County? 🗌 Yes 🔲 No If yes, name and department:							
Do any or your relatives or menus wor	K IOI L	Logan Co			name		,partment.
Are you willing to submit to a mandatory background check and drug screen? 🗌 Yes 🛛 No							

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POSITION AND A	VAILABIL	ITY			
Position applying fo	Date available to start work:				
Desired Salary:	What hours are you available to work:				
What type of employ	e of employment do you prefer to work? 🗌 Full-time 🛛 Part-time 🗌 Summer/College 🗌 Seasonal				
What days are you	What days are you available to work? 🗌 Mo 📋 Tu 📄 We 📄 Th 📄 Fr 📄 Sa 📄 Su				
POSITION AND A	VAILABILI	ITY cont.			
Are you willing to we	ork overtime	, including weekends	and holidays? 🗌 Yes [	No	
Are you on layoff an	id subject to	recall? 🗌 Yes 🗌 N	o		
	Do you have any commitments (i.e., second job, school) which might interfere with, or adversely affect employment with our organization?  Yes No If yes, Please explain:				
REFERAL SOURCE         How did you learn about this job posting?         Newspaper         Website         Facebook         Radio         Job Fair					
🗌 Indeed 🛛 Emp	oloyee (nam	e)	D C	other	
<b>REFERENCES</b> List First and Last Name	three people	-	t you have known for at le	-	ear. Phone Number
		Relationship (e.g., friend, teacher)	Occupation	Years Known	
EDUCATION					
	Name		Address		
High School					
	Did you graduate? Yes No If no, do you have a G.E.D? Yes No				D? ∐Yes ∐No
	Name Address				
Trade/Voc. School	Frade/Voc. School Course of Study				
	Did you gra	aduate? 🗌 Yes 🗌 No	Degree/Cert:		

	Name	Address		
College/University	Course of Study			
	Did you graduate?	Degree/Cert:		
	Name	Address		
Other (Specify)	Course of Study			
	Did you graduate?	Degree/Cert:		
MILITARY EXPER	RIENCE			
Branch:	Rank:	Discharge Date:		
Type of Discharge:_		Total years in service:		
Describe your position/skills/duties/qualifications:				

**APPLICANT**: In this section, list all employment history and work experience, including military. Begin with your <u>current</u> employer; enter "none" if unemployed. Use additional paper if necessary. Failure to include all employment may be grounds for disqualification.

EMPLOYMENT HISTORY						
Current Employer:			Start	Date:	End Date	:
May we contact your employer?	Beginning Salary:	Ending Salar	y:	Employment	Status:	
□Yes □ No				☐Full-time	Part-time	Other
Address (Street, City, State, Zip):				Phone Number	er:	
Job Title:			Supervis	or Name:		
Describe your duties:						
Reason for Leaving:						
Reason for Leaving.						

Past Employer:			Start D	Date:	End Date:	
May we contact your employer?	Beginning Salary:	Ending Salary:	   E	Employment Sta	atus:	
│ □Yes □ No				Full-time	Part-time	Other
Address (Street, City, State, Zip):	:		F	Phone Number:		
Job Title:				Nome		
		Su	ıpervisor	Name:		
Describe your duties:						
Reason for Leaving:						
Past Employer:			Start D	Date:	End Date:	
May we contact your employer?	Beginning Salary:	Ending Salary:	E	Employment Sta	atus:	
□Yes □ No			•	_	Part-time	Other
Address (Street, City, State, Zip):	:		F	Phone Number:		
Job Title:		Su	ipervisor	Name:		
Describe your duties:						
Reason for Leaving:						
EMPLOYMENT HISTORY co	ont.					
Past Employer:			Start D	Date:	End Date:	
May we contact your employer?	Beginning Salary:	Ending Salary:	E	Employment Sta	atus:	
□Yes □ No			[	Full-time	]Part-time	Other
Address (Street, City, State, Zip):	 	_	F	Phone Number:		
Job Title:		Su	ipervisor	Name:		
Describe your duties:		·				
Reason for Leaving:						
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Please explain any gaps in your employment history

### SKILLS and QUALIFICATIONS

List any experience with vehicles, machinery, and heavy equipment that you have operated (e.g., dump trucks, tractors, loaders, excavators, graders, chainsaw, pavers, rollers, trenchers, etc.):

List any specialized skills or trades (e.g., welding, carpentry, masonry, diesel mechanic, GIS, etc.): \_

#### **SKILLS and QUALIFICATIONS cont.**

List any experience with office equipment such as computers, software, copiers, programs, etc. \_

List professional, trade, business, or civil activities and offices held (you may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability, or other protected status):
List any licenses, certifications, specialized training and apprenticeships that you currently have or held in the past:
Please state any additional information you feel may be helpful to us in considering your application

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**<u>Applicant</u>**: On page 6 ('Applicant's Certification and Agreement'), please read each statement carefully. If you understand and agree to the contents and conditions, indicate so with your initials in the space provided. If you have any questions regarding these statements, contact our office before initialing the paragraph.

## **APPLICANT'S CERTIFICATION AND AGREEMENT**

- 1. \_\_\_\_\_\_ I understand that neither completing this application nor any other part of my consideration for employment establishes any obligation for the Logan County Engineer to hire me. I understand that my employment may be for no definite time if employed. I understand that employment with the Logan County Engineer is at will. The Logan County Engineer or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of the Logan County Engineer other than the Appointing Authority has the authority to make any assurance to the contrary, except that the Logan County Engineer may do so in writing under specific limited circumstances.
- 2. \_\_\_\_\_ I confirm that a copy of the job description for which I am applying was attached to this application for employment. I attest that I read and understand the duties, requirements, working conditions, and physical demands of the job description and certify that I can perform the essential functions of the job for which I have applied, with or without reasonable accommodation.
- 3. \_\_\_\_\_ I understand and accept that depending on the department I'm applying for, I may be required to work overtime, weekends, evening hours, or other times as determined by the Logan County Engineer, including being on call.
- 4. \_\_\_\_\_ I acknowledge that if selected for employment, my initial and continued employment may be contingent upon the successful completion of any medical examination necessary, including drug, alcohol, or substance abuse testing, to determine whether I can physically perform the position's essential functions with or without reasonable accommodation.
- 5. \_\_\_\_\_ I understand that if selected for employment, as a public employee, I am required to demonstrate unwavering integrity and ethical behavior and represent a positive impression of the organization, Engineer, co-workers, the county and elected officials. I acknowledge that this principle applies during work hours or out in the public during personal time. I further understand that I am required to abide by all the rules and regulations of the Logan County Engineer's Office and Appointing Authority.
- 6. I understand that false statements, omissions, or misleading or incomplete information in my application or interview(s) may disqualify me for further consideration, *withdrawal of an employment offer, or* result in discipline or discharge from employment, regardless of when such information is discovered.
- 7. \_\_\_\_\_ I understand that the Logan County Engineer requires high integrity and confidentiality from its employees. I understand that various law enforcement and informational agencies that exchange information and data with the employer require that the employer's staff do not have a record of unlawful activities. I understand and authorize the employer to investigate my background for any illegal and criminal activity, which may also include drug, alcohol, or substance abuse testing.
- 8. \_\_\_\_\_ I authorize the Logan County Engineer to contact and obtain work information from employers, schools, and personal references named in this application. I also authorize Logan County to get an abstract of my driver's license or commercial driver's license record so that my qualifications for employment can be reviewed. If hired, I authorize Logan County to continue to obtain this information during my employment with Logan County.

*My* signature certifies that I have read, understand and agree to each statement above. I also confirm that all the information I furnished in this employment application is true, accurate, and complete to the best of my knowledge. I authorize the investigation of all statements contained in this application.

Signature: _		Date:
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