KEARNY COUNTY SHERIFF'S DEPARTMENT

APPLICATION FOR EMPLOYMENT

Full Legal Name:			Social Security Numb	er:
Last	First	Middle		(Optional)
Address:				
Apt#, Street		City	State	Zip Code
Telephone ()	(Day) Mess	age Number ()	email	
- · · <i>·</i>		0		(Optional)
Are you known to employ	yers/references/scho	ools by another na	me? If Yes, what name_	
Do you hold a high school	ol diploma or equiva	alent?	Yes	No
Are you over the age of 2	1?		Yes	No
Have you ever been conv	icted of a felony?		Yes	No
Are you a United States c	titizen?		Yes	No
Have you been convicted	of an act of Domes	stic Violence?	Yes_	No
Do you currently hold, or	are able to obtain a	a valid Kansas Dri	ver's License? Yes_	No
Drivers License Number		State		

Drivers License Number

Educational BackgroundInstitution Name, City and StateDegree or
Certificate
AttainedMajor Area
of StudyDate of
CompletionHigh School/GEDImage: Construction of StudyImage: Construction of StudyImage: Construction of StudyCollege/UniversityImage: Construction of StudyImage: Construction of StudyImage: Construction of StudyGraduate SchoolImage: Construction of StudyImage: Construction of StudyImage: Construction of StudyVo-Tech, Business
SchoolImage: Construction of StudyImage: Construction of StudyImage: Construction of StudyOther EducationImage: Construction of StudyImage: Construction of StudyImage: Construction of StudyImage: Construction of Study

Were you in the	Military? Yes_	No	_ What branch?
-----------------	----------------	----	----------------

Is copy of DD-214 available?	Yes_	No	When inducted, when discharged?		
------------------------------	------	----	---------------------------------	--	--

Have you completed a basic class at KLETC? Yes ___ No ___ If yes, when? _____

WORK EXPERIENCE (Starting with your cur	rrent or last job, c	omplete all of th	e informatio	on for the past three	(3) jobs you	have held.)
Name and Address of Employer.						
Employment Start Date					_Salary \$	
Reason for leaving						
Title List job descr	iption, promo	tions, award	s or reco	gnition		
Name and Address of Employer.						
Employment Start Date	End Date	Fu	ll time	_Part Time	_ Salary \$	
Reason for leaving						
Title List job descr	iption, promo	tions, award	s or reco	gnition		
Name and Address of Employer.						
Employment Start Date						§
Reason for leaving						
Title List job descr						
List any other jobs you have held in the pas	t 10 years.					
Employer Name	Start Date	End Date	Reason f	or leaving		Wage

Employer Name	Start Date	End Date	Reason for leaving	Wage

Other Related Experience (*Please describe here any other related professional certifications, honors, organization membership, special skills, qualifications, or experiences not mentioned elsewhere.*)

Computer Skills (name software and hardware)

Can you communicate with more than one language? Yes __ No __ If yes, explain. _____

REFERENCES (Include supervisors and persons we may contact to verify your performance and qualifications.) Name Address Occupation Your Supervisor? Yes__ No__ Organization____ Phone Name Occupation Address Your Supervisor? Yes__ No__ Phone ____ Organization Name Occupation Address Your Supervisor? Yes No Phone ____ Organization_____

Why do you want to work here?

How could you benefit this agency?

Write something about yourself that you think needs to be known that will cast you in the most favorable light.

AFFIRMATION

I affirm that the facts set forth above in my application for employment are **true**, **correct**, **and complete** to the best of my knowledge. I understand that I may be required to submit information not requested on this application form; that the employing agency may verify any information provided by me in the employment process; and that incomplete information or omission of my signature is just cause for rejection of my application.

I understand and agree that, if hired, my employment would be contingent upon conditions specific to the position for which I am applying. I also understand that any omission of information, or erroneous information provided in any part of the employment process, would be sufficient cause for discharge. I also understand that if hired I am an "employee-at-will," meaning that either Kearny County or I may terminate our employment relationship at any time, either with or without cause, and also with or without advance notice.

Signature of Applicant
Kearny County is an Equal Opportunity Employer

Date