

Application for Employment Montgomery County Sheriff

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability or veteran status, sexual orientation, or any other legally protected status.

(PLEASE PRINT)

Function(s) Applied For _____

Date of Application _____

How Did You Learn About Us?

Advertisement

Friend

Walk-In

Employment Agency

Relative

Other _____

Last Name _____

First Name _____

Middle Name _____

Address _____

Number _____

Street _____

City _____

State _____

Zip Code _____

Telephone Number(s) _____

Social Security Number _____

If you are under 18 years of age, can you provide the required proof of your eligibility to work?

Yes No

Have you ever filed an application with us before?

Yes No

If Yes, give date _____

Have you ever been employed with us before?

Yes No

If Yes, give date _____

Are you currently employed?

Yes No

May we contact your present employer?

Yes No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?

Yes No

Proof of citizenship or immigration status will be required upon employment

On what date would you be available for work?

Are you available to work: Full Time Part Time Shift Work Temporary

Are you currently on "lay-off" status and subject to recall?

Yes No

Can you travel if a job requires it? Yes

No

Have you been convicted of a felony within the last 7 years?

Yes No

Conviction will not necessarily disqualify an applicant from employment

If Yes, please explain _____

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

Montgomery County Sheriff

Other Qualifications

Summarize special job related skills and qualifications acquired from employment or other experience.

Specialized Skills

Check Skills/Equipment Operated

<input type="checkbox"/> CRT	<input type="checkbox"/> Fax	Production / Mobila	Other(List)
<input type="checkbox"/> PC	<input type="checkbox"/> Lotus 1-2-3	_____	_____
<input type="checkbox"/> Calculator	<input type="checkbox"/> PBX System	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Wordperfect	_____	_____

State any additional information you feel may be helpful to us in considering your application.

Note to Applicants: *DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING*

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A description of the activities involve in such a job occupation is attached. Yes No

References

1. _____ (_____) _____
Name Phone

Address

2. _____ (_____) _____
Name Phone

Address

3. _____ (_____) _____
Name Phone

Address

Montgomery County Sheriff

Employment Experience

Start with your present or last job. Include any job related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status

Employer	Dates employed From	To	Work Performed
Address			
Telephone Number(s)	Hourly Rate/Salary		
	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			

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	Starting	Final	
Job Title	Supervisor		
Reason for Leaving			

If you need additional space, please continue on a separate sheet of paper.

List professional, trade, business, or civic activities and offices held.

You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status.

Montgomery County Sheriff

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applicants are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conducting sunless such change is specifically acknowledge in writing by an authorized executive of organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge, I understand, also, that I am required to abide by all rules and regulations of the employer.

Signature of Applicant

Date

Montgomery County is an Equal Opportunity Employer. The County recognizes and supports the policy or equal employment opportunity and provides all applicants and employees equal opportunity without regard to race, color, religion, sex, national origin, age, marital or veteran status, political affiliation, disabled status, or any other legal protected status. The spirit and intent of this policy shall be implemented throughout the County in all personal concerns.

It is the policy of the County not to discriminate against qualified individuals with a disability because of the disability in regard to job application procedures, hiring, advancement, or discharge of employees, employee compensation, job training and other terms, conditions, and privileges of employment. Furthermore, it is the policy of this county that no qualified individual with a disability shall, by reason of that disability, be excluded from participation in or be denied the benefits of the service, programs or activities of the County or be subjected to discrimination by the county.

I authorize investigation of all statements contained in this application. Your signature authorizes this department to do a background check and criminal history check which is a hiring process. I understand that my representation or omission of facts called for is a cause for dismissal. Further I understand and agree that my employment is for no definite period, and may, regardless of the date of payment of my wages and salary, be terminated at any time without any previous notice.

Montgomery Country has adopted an employee drug testing policy for all Public Safety Employees. I understand I will be required to take a pre-employment drug screen and will be tested at random per the county's Employees Personnel Benefits Policy.

Signature of Applicant

Date

Montgomery County Sheriff

Education

Name and Address of School Major Course of Study Years Completed Diploma/Degree

Elementary
School

High
School

Undergraduates
College

Graduate
Professional

Other (Specify)

Indicate any Foreign Languages you can speak, read and/or write
Fluent Good Fair

Speak

Read

Write

Describe any specialized training, apprenticeship, extra-curricular activities, etc. That you feel may be helpful to us in considering your application.

Describe any job related training received in the military that you feel may be helpful to us in considering your application.

Montgomery County Sheriff

For Personal Use Only

Arrange Interview Yes No

Remarks _____

Interviewer Date

Employed Yes No Date of Employment _____

Job Title _____ Hourly Rate/Salary _____ Department _____

By: _____
Name and Title Date

Notes _____

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