

Have you ever been convicted of a crime (other than a minor traffic violation)?..... Yes No
If yes, state the date, location and nature of the offense:_____

Have you ever been discharged or terminated from any place of employment?..... Yes No
If yes, please explain:_____

NOTE: A termination or a conviction will not necessarily disqualify you from employment. It will be considered in terms of work to be performed.

EDUCATION RECORD

Did you graduate from high school?..... Yes No

If No, did receive a GED certificate?..... Yes No

Did you graduate from college?..... Yes No

SCHOOL	NAME AND LOCATION	UNITS	MAJOR STUDY	H.S. DIPLOMA / DEGREE EARNED
High School				
College				
Trade/Business				
Graduate School				

For positions which require a high school graduation or GED or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.

LICENSES & OTHER SKILLS

List current licenses, certifications, or registrations required for the position for which you are applying.

Do you possess a valid driver's license?..... Yes No
If so, license expires_____ Class_____ Restrictions (if any)_____

For positions that require typing: I certify that I can type at a speed of _____WPM.

List any special skills you possess and/or equipment or office machines you can operate related to this position:

MILITARY SERVICE

Have you ever been a member of the Armed Forces?..... Yes No

Branch_____ Rank_____ Discharge Type_____

Duties:_____

EMPLOYMENT HISTORY

Provide information regarding all paid, military, and volunteer work which may be related to the position for which you are applying. Describe your most recent position first; then list other positions in order held, beginning with the most recent. Use a separate block for each position, even if with the same organization. Use additional sheets if necessary. DO NOT USE REFERENCES SUCH AS "SEE RESUME" IN PLACE OF COMPLETING THIS SECTION. Insufficiently completed applications will not be considered.

Employer: _____ Position: _____

Address: _____

City _____ State _____ Zip Code _____

From (Mo. /Yr.) _____ To (Mo. /Yr.) _____ Salary: _____

Full-Time (30+ hrs. /wk.) Part-Time (<30hrs. /wk.) Telephone: _____

Supervisor's Name/Title: _____

Related Duties: _____

Reason for Leaving: _____

Employer: _____ Position: _____

Address: _____

City _____ State _____ Zip Code _____

From (Mo. /Yr.) _____ To (Mo. /Yr.) _____ Salary: _____

Full-Time (30+ hrs. /wk.) Part-Time (<30hrs. /wk.) Telephone: _____

Supervisor's Name/Title: _____

Related Duties: _____

Reason for Leaving: _____

Employer: _____ Position: _____

Address: _____

City _____ State _____ Zip Code _____

From (Mo. /Yr.) _____ To (Mo. /Yr.) _____ Salary: _____

Full-Time (30+ hrs. /wk.) Part-Time (<30hrs. /wk.) Telephone: _____

Supervisor's Name/Title: _____

Related Duties: _____

Reason for Leaving: _____

EMPLOYMENT HISTORY (Continued)

Employer: _____ Position: _____

Address: _____

City _____ State _____ Zip Code _____

From (Mo. /Yr.) _____ To (Mo. /Yr.) _____ Salary: _____

Full-Time (30+ hrs. /wk.) Part-Time (<30hrs. /wk.) Telephone: _____

Supervisor's Name/Title: _____

Related Duties: _____

Reason for Leaving: _____

Employer: _____ Position: _____

Address: _____

City _____ State _____ Zip Code _____

From (Mo. /Yr.) _____ To (Mo. /Yr.) _____ Salary: _____

Full-Time (30+ hrs. /wk.) Part-Time (<30hrs. /wk.) Telephone: _____

Supervisor's Name/Title: _____

Related Duties: _____

Reason for Leaving: _____

Please state below any other information that would be helpful in determining your qualifications for this position. You may include significant accomplishments, previous career highlights, or any other relevant information that is not requested in this employment application.

ACKNOWLEDGEMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the areas to indicate that you have read and understand each of the statements. If you have any questions, contact the Recorder/Auditor's Office.

_____ All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.

_____ Employment will be *at will* unless specifically stated to be otherwise. "At will" means Lincoln County may terminate my employment at any time with no advance notice and for any reason or no reason.

_____ This application is the property of Lincoln County and will become part of my personnel file if I am hired.

_____ Per NRS 281.060 (2), I opt to exercise my rights by voluntarily attaching a copy of my DD214. NRS 281.060(2) states preference must be given, if qualifications of applicants are equal: a) first, to an honorably discharged military personnel of the United States who is a citizen of Nevada; and b) second, to other citizens of Nevada.

I certify that all statements contained on this application are true and correct. I authorize Lincoln County to investigate my references and to make an independent investigation of any character, conduct and employment records; including, but not limited to, criminal and traffic records. I hereby release all employers, schools, or persons from all liability in responding to inquiries in connection with my application. I understand that any misrepresentation, falsification or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment, regardless of length of employment. In the event I am employed by Lincoln County, I agree to comply with all rules and policies.

Signature of Applicant: _____ **Date:** _____