

**APPLICATION FOR EMPLOYMENT
COUNTY OF SPINK
210 EAST SEVENTH AVENUE
REDFIELD, SD 57469-1299
An Equal Opportunity Employer**

Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or disability. For requests related to any accommodation needed for the application process, see the County Auditor.

Position Applying for: _____

Name: _____

Social Security Number: - - -

Telephone Number: _____

Home

Are you under age 18? Yes No

Have you been convicted of a felony within the last (7) years related to theft, dishonesty, or driving under the influence? If yes, explain _____

If yes, please explain:

Note: A conviction will not automatically disqualify an applicant. The employer will consider the type and seriousness of the crime, the frequency of violations, the applicant's age at the time of conviction, and the date of conviction or time elapsed since the conviction or completion of any jail sentence in addition to other job-related criteria.

Are you legally eligible to be employed in the United States? Yes No

Do you have or can you get a State of South Dakota Driver's License? (If position requires) Yes No

Employment for which you are available: Full Time Part Time

When could you begin employment? _____ Now _____ Beginning _____

After _____ working days notice to current employer

May we contact your current or most recent employer regarding your qualifications? Yes No

Professional References – Please include name, address and telephone number:

1. _____

Education and Training

Circle last year of education completed. For high school diploma or GED circle "12".

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 plus

Please list name of school and degrees completed. Please indicate diploma, GED, or BS/BA.

Location	Graduated or Credit hours	Major(s)
High School		
College/University		
Graduate School		
Business or Vocational School		
Internships		

Additional training (workshops, seminars, apprenticeships, military or other training). Include approximate hours or days of training.

List any relevant licenses or certificates:

Employment (If all requested information is included on an attached resume, you do not need to complete this section.)

1. Current or most recent position:

Dates of Employment: From (mo/yr) _____ to (mo/yr) _____

Total years _____ months _____

Job Title _____

Employer _____ Type of Business _____

Employer's Address _____

Phone _____ Supervisor's Name & Title _____

Number of employees you supervised: _____ Average hours you worked per week _____

Salary: Starting _____ Final _____

Reason for Leaving _____

Complete description of duties and knowledge or skills gained from this experience _____

2. Next Previous Position:

Dates of Employment: From (mo/yr) _____ to (mo/yr) _____
Total years _____ months _____

Job Title _____

Employer _____ Type of Business _____

Employer's Address _____

Phone _____ Supervisor's Name & Title _____

Number of employees you supervised: _____ Average hours you worked per week _____

Salary: Starting _____ Final _____

Reason for Leaving _____

Complete description of duties and knowledge or skills gained from this experience _____

3. Next Previous Position:

Dates of Employment: From (mo/yr) _____ to (mo/yr) _____
Total years _____ months _____

Job Title _____

Employer _____ Type of Business _____

Employer's Address _____

Phone _____ Supervisor's Name & Title _____

Number of employees you supervised: _____ Average hours you worked per week _____

Salary: Starting _____ Final _____

Reason for Leaving _____

Complete description of duties and knowledge or skills gained from this experience _____

4. Next Previous Position:

Dates of Employment: From (mo/yr) _____ to (mo/yr) _____
Total years _____ months _____

Job Title _____

Employer _____ Type of Business _____

Employer's Address _____

Phone _____ Supervisor's Name & Title _____

Number of employees you supervised: _____ Average hours you worked per week _____

Salary: Starting _____ Final _____

Reason for Leaving _____

Complete description of duties and knowledge or skills gained from this experience _____

Additional Space. Use this block to complete information given elsewhere on this form. If you still need more space, attach additional sheet. You may also use this space to summarize other pertinent education or experience that qualifies you for the position for which you are applying. _____

By submitting this application, 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. 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 county.

Signature of applicant

Date