



Costilla County

Application for Employment

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

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How Did You Learn About Us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip code
Telephone Number(s)		Social Security Number
		- -

(Put a X next your answer)

Email address _____

Have you ever filed an application with us before? YES NO
 If Yes give dates _____

Have you ever been employed with us before? YES NO
 If yes, give dates _____

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 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 crime within the last 7 years? YES NO
 Conviction will not necessarily disqualify an applicant from employment.

If yes, please explain: _____

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. Explain any gaps in employment in the comment section below.

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

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

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

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

Comments: _____

Education

	Name and Address of School	Course of Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate/ Professional				
Other (Specify)				

Indicate any foreign language you can speak, read and/or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

Describe any specialized training, apprenticeship, skills, and extra-curricular activities.

Describe any job-related training received in the United States military

<p>List professional, trade, business or civic activities and offices held. <i>You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:</i></p> <p>_____</p> <p>_____</p> <p>_____</p>
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Additional information

Other Qualifications

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

Specialized Skills Mark Skills/Equipment Operated

<input type="checkbox"/> PC	<input type="checkbox"/> MAC	<input type="checkbox"/> Adobe
<input type="checkbox"/> Microsoft Outlook	<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Microsoft Excel
<input type="checkbox"/> Microsoft Access	<input type="checkbox"/> Microsoft PowerPoint	<input type="checkbox"/> QuickBooks
<input type="checkbox"/> Other (list): _____		

State any additional information you feel may be helpful to us in continuing 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 involved in such a job or occupation is attached.

YES NO

References

1.	(Name)	()	-	Phone #
(Address)				
2.	(Name)	()	-	Phone #
(Address)				
3.	(Name)	()	-	Phone #
(Address)				

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 applications 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 conduct unless such change is specifically acknowledged in writing by an authorized executive of this 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

FOR PERSONNEL DEPARTMENT USE ONLY			
Arrange Interview	YES	NO	
Remarks	_____		
_____	_____		
Employed	YES	NO	Date of Employment _____
Job Title	_____		Department _____
Hourly Rate/Salary	_____		
By	_____		Date _____

NOTES _____

FOR PERSONNEL DEPARTMENT USE ONLY		
Position(s) applied for is Open:	YES	NO
Position(s) Considered For:	_____	
Date	_____	

NOTES _____
