

**APPLICATION FOR EMPLOYMENT  
BUTLER COUNTY, KANSAS**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Telephone: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Position Desired: \_\_\_\_\_ Department: \_\_\_\_\_

Available to work:       Full-time       Part-time       Temporary

Evenings       Weekends

Date available to work: \_\_\_\_\_

Yes    No      **Have you ever been employed by Butler County before?**  
                                 **If yes:      When? \_\_\_\_\_**  
                                 **Department/Position \_\_\_\_\_**

Yes    No      **Do you have any relatives working for the County of Butler?**  
**If yes, in which department? \_\_\_\_\_**

Yes    No      **Are you legally eligible for employment in the U.S.?**

Yes    No      **Are you 18 years of age or over?**

Yes    No      **Will you work overtime?**

Yes    No      **Are you currently on "lay-off" status?**

Yes    No      **Can you travel if job requires it?**

Yes    No      **Have you been convicted of an offense against the law  
other than a minor traffic violation?**

**If yes, explain: \_\_\_\_\_**

Complete this section only if you served in the U.S. Armed Forces:

Period of Active Duty: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Date of Final Discharge: \_\_\_\_\_

Were you dishonorably discharged?       Yes       No

Describe your duties and any special training: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## EDUCATION

Circle highest grade completed:      1 2 3 4 5 6 7 8    9 10 11 12    13 14 15 16

If you did not complete high school, do you have a GED?       Yes       No

Name and Location	Course Of Study	Year Complete	Did you Graduate	Degree or Diploma
High School				
College/University				
Business/Trade School				
Other				

## SKILLS INVENTORY

Check those skills which you have acquired:

### Clerical

- Typing WPM \_\_\_\_\_
- Shorthand WPM \_\_\_\_\_
- Dictaphone
- Personal Computer
- Word Processing
- Microsoft Word
- Microsoft Excel
- Word Perfect Office
- Calculator
- Filing
- General Accounting
- Bookkeeping
- Payroll
- Microfilm

### Technical

- Computer Programming
- EMT
- Surveying
- Drafting
- Cartography
- Photography
- Construction Inspector
- Operate Radio

### DRIVING LICENSES

- Drivers License  
State: \_\_\_\_\_  
Lic. # \_\_\_\_\_
- Chauffeurs License  
State: \_\_\_\_\_  
Lic. # \_\_\_\_\_

### Maintenance

- Truck Driver to 1.5 tons
- Truck Driver over 1.5 tons
- Backhoe-Loader
- Grader
- Farm Tractor
- Trencher
- Bull Dozer
- Front End Loader
- Street Sweeper
- Snow Plow
- Welding
- Plumbing
- Electrical
- Carpentry
- Vehicle Mechanic
- Concrete Work
- Asphalt Work

**Other Skills and Licenses**

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## EMPLOYMENT

Please give an accurate and complete full-time employment record. Start with present or most recent employer. Attach additional pages if necessary.

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Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Employment From: \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Title/Description of Work: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Employment From: \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Title/Description of Work: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Employment From: \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Title/Description of Work: \_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Supervisor: \_\_\_\_\_

Telephone: \_\_\_\_\_ Employment From: \_\_\_\_\_ To \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Job Title/Description of Work: \_\_\_\_\_

\_\_\_\_\_

May we contact these employers?

Yes

No

If you answered no, which employers do you request we not contact? \_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

Give name, address and telephone numbers of three references who are not related to you and are not previous employers:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**COMMENTS:** State why you believe you are qualified to perform the kind of work for which you are applying: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*"I hereby certify that the information given in this application is true and correct. I understand and agree that the County may research all statements and claims made on this application and make reference checks and that employment is contingent upon my passing a physical exam, which may include a drug screening test. I further understand that any misrepresentation or omission of facts upon this application, or failing the physical exam or drug test, will be sufficient cause for reflection or dismissal, if employed."*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**PERSONNEL DEPARTMENT ONLY**

Required Qualifications Met?

Yes

No

Preferred Qualification Detail: \_\_\_\_\_

\_\_\_\_\_

**REMARKS:**

\_\_\_\_\_  
initial

\_\_\_\_\_  
date



# **AUTHORIZATION TO RELEASE INFORMATION**

## **TO WHOM IT MAY CONCERN:**

**I hereby request and authorize you to furnish the Butler County \_\_\_\_\_ Department with any and all information they may request concerning my work record, educational history, military record, criminal record, driving record, financial status, general reputation, and past or present medical condition.**

**This authorization is specifically intended to include any and all information of a confidential or privileged nature as well as photocopies of such documents, if requested.**

**I hereby release you and your organization from any liability or damage that would result from furnishing the information requested above.**

**SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_**

**PRINTED NAME: \_\_\_\_\_**

**WITNESSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_**