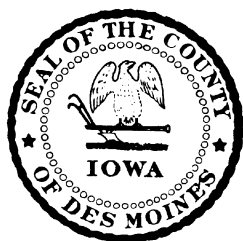


EMPLOYMENT APPLICATION

Fill Out Completely. Type or Print In Ink



Des Moines County, Burlington, Iowa

Auditor's Office
 Courthouse, 513 North Main Street
 Burlington, Iowa 52601

Date	Email Address: If available
Position Applied For:	

Name: Last	First	Middle	Social Security No.	Home Phone No.
Address: No. & Street	City	State	Zip Code	Message: Name/Phone
				Cell Phone No.

EDUCATION

Cite Specialized Training Other Than Formal Education On Reverse Side

High School	Name of School	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No	G.E.D.: <input type="checkbox"/> Yes <input type="checkbox"/> No
	Address: No. & Street	City	State
		Zip Code	Vocational Program
College	Name of College	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree
	Address: No. & Street	City	State
		Zip Code	Major
Other Schools	Name of Institution	Graduated: <input type="checkbox"/> Yes <input type="checkbox"/> No	Degree or Certificate
	Address: No. & Street	City	State
		Zip Code	Major/Type of Program

EMPLOYMENT HISTORY

List **ALL** Positions Held In Reserve Order, Present (or most recent) Job First

Present Job	Name of Employer	Type of business		
	Date of Hire: Mo/Day/Yr.	Address: No. & Street	City	State
		Zip Code	Company Phone No.	
Your Position	Nature of Duties			
Final Salary	Supervisors: Name	Title	Reason for Seeking New Employment	
Previous Job	Name of Employer	Type of business		
	Date of Hire: Mo/Day/Yr.	Address: No. & Street	City	State
		Zip Code	Company Phone No.	
Your Position	Nature of Duties			
Final Salary	Supervisors: Name	Title	Reason for Seeking New Employment	
Previous Job	Name of Employer	Type of business		
	Date of Hire: Mo/Day/Yr.	Address: No. & Street	City	State
		Zip Code	Company Phone No.	
Your Position	Nature of Duties			
Final Salary	Supervisors: Name	Title	Reason for Seeking New Employment	

Continued On Reverse Side

Previous Job Date of Hire: Mo/Day/Yr.	Name of Employer	Type of business		
	Address: No. & Street	City	State	Zip Code
Your Position	Nature of Duties			
Final Salary	Supervisors: Name	Title	Reason for Seeking New Employment	
Previous Job Date of Hire: Mo/Day/Yr.	Name of Employer	Type of business		
	Address: No. & Street	City	State	Zip Code
Your Position	Nature of Duties			
Final Salary	Supervisors: Name	Title	Reason for Seeking New Employment	

OTHER INFORMATION

Military	Branch	Rank	Duties
	Discharge: <input type="checkbox"/> Honorable <input type="checkbox"/> Other (Explain Below)		
Qualifications And Skills	Describe Any Equipment Extensively Operated By You (Office, Construction, Buses, Trucks, Etc.)		
	Current License: <input type="checkbox"/> Driver <input type="checkbox"/> Commercial Driver License <input type="checkbox"/> Chauffer <input type="checkbox"/> None	License Ever Suspended or Revoked? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	No.: _____ State: _____	Date: _____	Reason: _____
Ever Convicted of A Crime (except minor traffic violations)? <input type="checkbox"/> Yes <input type="checkbox"/> No		Ever Collected Money or Bonded? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Dates: _____	Offenses: _____	For Whom: _____	
List Any Specialized Training, Certificates or Achievements:			
How did you hear about this employment opportunity?			
Do you have any relatives or friends currently employed by the County? <input type="checkbox"/> Yes (List names) <input type="checkbox"/> No			
Have you reviewed the job description or posting for the position sought?			

REFERENCES

(List **Three** (Local Area Residents, If Available))

Name:	Address:	Phone:
Name:	Address:	Phone:
Name:	Address:	Phone:

Des Moines County, Iowa Does Not Discriminate On the Basis of Race, Color, National Origin, Sex, Sexual Orientation, Gender Identity, Religion, Age, or Disability in Employment or the Provision of Services.

I hereby certify that the answers given and statements made by me on this Employment Application are true & correct & that there are no material omissions. I authorize my present and former employers to give County officials any information regarding me or my performance and release such employers, including their representatives & their companies, from all liability from damage for providing requested information. I understand that should investigation disclose misrepresentation or falsification, I will be dismissed immediately, my application will be rejected and I will be disqualified from making future application with the County.

I understand that any employment offered by the County is "employment at will" & I may be terminated for any reason not violative of law (or a collective bargaining agreement where applicable). I understand my driving and any criminal records may be checked and I agree to submit to a pre-employment physical examination at County expense following a conditional offer of employment. I also understand that the Des Moines County, Iowa has a strict policy against illegal drug involvement by employees that can result in immediate disqualification or dismissal from employment for any such illicit activities occurring on or off the job. You may be subject to random drug testing. I also understand the County strictly enforces the Iowa Smokefree Air Act and employees violating said Act are subject to discipline, up to and including discharge.

Read the Above Statement Carefully!	Date	Signature of Applicant
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*** OPTIONAL STATISTICAL FORM ***

COUNTY OF DES MOINES, IOWA
EQUAL EMPLOYMENT AFFIRMATIVE ACTION PROGRAM
REQUEST FOR APPLICANT DATA

TO ALL APPLICANTS: Des Moines County, Iowa has an Equal Employment Affirmative Action Program in effect. Qualified applicants are considered in the hiring process without regard to race, creed, color, religion, sex, age, national origin, marital status or disability. This Program ensures affirmative action is taken to recruit minority, female and disabled individuals.

PLEASE NOTE: Completion of this form is optional and your decision to complete this form is strictly voluntary. If you choose to complete this form, it will be placed in a separate, confidential file in the Human Resources office. Any information you provide will not in any way be used against you as it does not become a part of your application form and is not available for review while your employment is under consideration. If you choose to not complete this form, it will not affect, in any way, any opportunities for employment or benefits.

PERSONAL DATA (Please print):

Name: _____ Date: _____

Position you are applying for: _____

AFFIRMATIVE ACTION RELATED DATA (Please circle appropriate answers):

Race/Ethnic Origin: African American Asian/Pacific Islander/Indian Subcontinent
Hispanic Native American/Alaskan Native
White (not of Hispanic origin) Other or combination of above

Sex: Male Female

Are you a Vietnam Era Veteran (as defined below)? Yes No

Definition: A person who served on active duty for more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged with other than a dishonorable discharge or was discharged or released from active duty for a service-connected disability.

Are you a Disabled Veteran (as defined below)? Yes No

Definition: A person entitled to disability compensation under regulations administered by the Dept of Veterans Affairs for a disability rated at 30% or greater, or a person whose discharge or release from active duty was for a disability incurred or aggravated in the line of duty.

Are you a person with a disability (as defined below): Yes* No

Definition: A person who has a mental or physical impairment which substantially limits one or more major life activities or who has a record of such impairment, or is regarded as having such an impairment.

***Do you need accommodation?** Yes No

(For affirmative action purposes, persons with disabilities are asked to describe any type of accommodation which you would like the County to consider to assist you in the hiring process or in the performance of your job. Use the back side of this form to describe any accommodations requested.)

IOWA VETERANS PREFERENCE POINTS DATA (Please circle appropriate answers):

(Note: Veteran information listed above will also be considered in computing preference points.)

Are you a World War II Veteran (as defined below): Yes No

Definition: A person who served on active duty at any time between December 7, 1941 and December 31, 1946 and was honorably discharged.

Are you a Korean Conflict Veteran (as defined below): Yes No

Definition: A person who served on active duty at any time between June 25, 1950 and January 31, 1955 and was honorably discharged.

Are you a Persian Gulf Conflict Veteran (as defined below): Yes No

Definition: A person who served on active duty at any time August 2, 1990 to present and was honorably discharged.