APPLICATION FOR EMPLOYMENT
PALO ALTO COUNTY
PO BOX 95
EMMETSBURG, IOWA 50536
PHONE: 712-852-2924
Email: cmoser@paloaltocounty.iowa.gov

An Equal Opportunity Employer

INSTRUCTIONS: Print in ink or type all answers. Use a separate sheet of paper for additional information or explanation.

PERSONAL DATA: **DATE OF APPLICATION:** _____

1. Name: _____
Last First Middle

2. Current Address: _____
Street City State Zip Code

3. Permanent Address: _____
Street City State Zip Code

4. Home No: ( ) _____

5. Cell No: ( )_____

7. Email: _____

List Schools/Addresses	**No. Years Completed**	**Diploma or Graduate**
High School		
College		

8. List any computer programs and skills that you might have that would aid in the performance of the position for which you are applying:

_____

_____

_____

_____

_____

_____

REFERENCES: List the name, title and address of three (3) persons with knowledge of your character, experience and abilities. Do not list relatives.

9. _____
(Name) (Title)
_____
(Address) (Telephone)

10. _____
(Name) (Title)
_____
(Address) (Telephone)

11. _____
(Name) (Title)
_____
(Address) (Telephone)

EMPLOYMENT RECORD: *Begin with present or most recent employer and continue for the past five years.*

12. Employer _____ Description of Duties: _____
Address: _____ _____
Immediate Supervisor _____ _____
Dates Employed: _____ _____
Position Held: _____ _____

13. Employer _____ Description of Duties: _____
Address: _____ _____
Immediate Supervisor _____ _____
Dates Employed: _____ _____
Position Held: _____ _____

14. Employer _____ Description of Duties: _____
Address: _____ _____
Immediate Supervisor _____ _____
Dates Employed: _____ _____
Position Held: _____ _____

When is the earliest date you would be available to start work? _____

Certification of Applicant: READ CAREFULLY
I HEREBY CERTIFY that this application contains no misrepresentations or falsifications and that the information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application will be rejected, I will be dismissed from the service, and I will be disqualified from applying in the future for any positions with the County of Palo Alto. I further authorize the County of Palo Alto to make all necessary and appropriate investigations to verify the information contained herein.

DATE: _____ *Signature of Applicant*: _____