

Davison County Human Resources
200 E 4th Ave, Mitchell, SD 57301-2631
APPLICATION FOR EMPLOYMENT
AN EQUAL OPPORTUNITY EMPLOYER

Photocopies are acceptable.

Instructions: Print in black ink or type all answers. Read carefully and fill in items completely. Incomplete or unsigned applications will not be accepted. A resume must be provided in conjunction with completed applications for full time positions.

Applications must be postmarked within 24 hours of closing date or forms may be emailed to HR@davisoncounty.org.

1. Exact Title of Position applied for _____
(You must submit a separate application for each job)

2. Name _____
Last First Middle

3. Mailing Address _____
Street / Box City State Zip

4. Social Security Number _____
(The disclosure of your social security number is voluntary)

5. Contact Info (_____) _____
Phone Email

6. Are you under age 18? ____ YES ____ NO

7. Are you either a US citizen or an alien authorized to work in the United States? ____ YES ____ NO
(Proof of citizenship or immigration will be required upon employment)

8. Males born after December 31, 1959, are required to register with Selective Service
Are you registered with selective service ____ Yes ____ No ____ N/A

9. Did you serve in the armed forces of the United States? ____ YES ____ NO
If so, were you honorably discharged? ____ YES ____ NO ____ Still currently serving

10. Will you accept: ____ Full-time employment
____ Part-time employment Shift preferences, if applicable ____ Day ____ Evening ____ Night

11. Check each type of employment you will accept:
____ Permanent ____ Temporary: six months or less ____ Season: duration of season

12. When could you begin employment: ____ Now ____ Beginning on _____
____ After _____ working days notice to present employer.

13. List names, emails, and phone numbers of three references.

1. _____ (_____) _____
Name Phone #

2. _____ (_____) _____
Name Phone #

3. _____ (_____) _____
Name Phone #

14. May we contact you current or most recent employer regarding your qualifications? ____ YES ____ NO

The information provided on the following pages will be used to determine your qualifications for this position. Be as thorough as possible in describing your education and work experience. **Vague or incomplete answers will not be interpreted in your favor.** If you need more space, attach additional sheets.

Education and Training

15. 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.

16. List formal education beginning with the most recent. Include high school, college, vocational or business school, apprenticeship, military training, etc.

A. Name of School _____
Address of School _____
Total credit hours _____
Type of credit (semester, quarter, CEU's etc.) _____
Major(s) or course _____ Minor(s) _____
Did you graduate? _____ Type of degree _____

B. Name of School _____
Address of School _____
Total credit hours _____
Type of credit (semester, quarter, CEU's etc.) _____
Major(s) or course _____ Minor(s) _____
Did you graduate? _____ Type of degree _____

C. Name of School _____
Address of School _____
Total credit hours _____
Type of credit (semester, quarter, CEU's etc.) _____
Major(s) or course _____ Minor(s) _____
Did you graduate? _____ Type of degree _____

D. Name of School _____
Address of School _____
Total credit hours _____
Type of credit (semester, quarter, CEU's etc.) _____
Major(s) or course _____ Minor(s) _____
Did you graduate? _____ Type of degree _____

17. Use this space to identify any other educational experiences you have had which are pertinent to this position. Include workshops, seminars, military or vocational training etc. which are not listed above. Indicate time involved (hours per week, number of weeks, number of credits, etc.)

18. List any relevant certificates, licenses or registrations you possess or are eligible for. Include expiration dates.

Work History

19. Begin with your current or most recent position and work backwards. List each promotion as a separate job. Include paid and verifiable non-paid experience, including military service. **Be as accurate and complete as possible**, especially in describing the duties of each position. If you need more space, attach additional sheets using the same format.

A. Current or most recent position:

Dates of employment: From (mo/yr) _____ to _____ Total years ___ months _____
Job Title _____ Salary (optional) _____
Employer _____ Type of Business _____
Employer's Address _____ Phone _____
Supervisor's Name and Title _____
Number of employees you supervised ___ Average hours worked per week ___ 1-10 ___ 11-20 ___ 21-30 ___ 31+
Reason(s) for leaving _____
Complete description of duties _____

B. Next previous position:

Dates of employment: From (mo/yr) _____ to _____ Total years ___ months _____
Job Title _____ Salary (optional) _____
Employer _____ Type of Business _____
Employer's Address _____ Phone _____
Supervisor's Name and Title _____
Number of employees you supervised ___ Average hours worked per week ___ 1-10 ___ 11-20 ___ 21-30 ___ 31+
Reason(s) for leaving _____
Complete description of duties _____

C. Next previous position:

Dates of employment: From (mo/yr) _____ to _____ Total years ___ months _____
Job Title _____ Salary (optional) _____
Employer _____ Type of Business _____
Employer's Address _____ Phone _____
Supervisor's Name and Title _____
Number of employees you supervised ___ Average hours worked per week ___ 1-10 ___ 11-20 ___ 21-30 ___ 31+
Reason(s) for leaving _____
Complete description of duties _____

If you need additional space, please continue on a separate sheet of paper

Please Read and Sign Below

If employed, I understand that my employment is for NO definite period of time, and if terminated Davison County is liable only for wages and benefits earned as of the date of termination.

I hereby certify that the information given by me is true and complete to the best of my knowledge and belief. I further authorize investigation of all statements I have made. Misrepresentation, falsification, or omission of facts called for in this application or in the interview process is cause for cancellation of this application or termination of employment.

Unsigned applications will NOT be considered.

Signature _____ Date _____

Authorization for reference requests (sign below).

I have applied for employment with Davison County and I desire that they be FULLY advised of my record with former employers. I, therefore, respectfully request that you furnish the requested information concerning my employment with your organization, and I hereby, release you from any and all liability of damages for providing the information requested.

Applicants Signature _____ Date _____

Davison County, in accordance with state and federal laws, does not discriminate on the basis of race, color, religion, sex (including pregnancy, gender identity, and sexual orientation), parental status, national origin, age, disability, genetic information (including family medical history), political affiliation, military service, or other non-merit based factors.

Davison County is an EQUAL OPPORTUNITY EMPLOYER