## LINCOLN COUNTY JOB APPLICATION

## AN EQUAL OPPORTUNITY EMPLOYER

We do not discriminate on the basis of Race, Color, Religion, National Origin, Sex, Age, or Disability. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Each question should be fully and accurately answered. No action can be taken on this application until all questions have been answered. Use blank paper if you do not have enough room on this application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job related information.

| Date: |  |  |  |
|-------|--|--|--|

|   | PERSO                 | NAL DATA           |                      |                        |                                   |  |
|---|-----------------------|--------------------|----------------------|------------------------|-----------------------------------|--|
| Last Name   | Firs                  | t                  |                      |                        | Middle Initial                    |  |
| Address (Number and Street  | City                  | State              |                      | Zip                    | <u> </u>                          |  |
| Mailing Address   | City                  | City State         |                      | Zip                    |                                   |  |
| Contact Phone Number - Text - Yes or                              | No Email Address      | Email Address      |                      | Social Security Number |                                   |  |
| Position Desired  | Salary Expected       | Salary Expected    |                      | Date Available         |                                   |  |
| Are you either a U.S. Citizen or an alien                         | authorized to work in | the United States? | Yes                  | No                     | -                                 |  |
| Do you have a valid Driver's License?                             | Number                | State              | State                |                        | Are you 18 years of age or older? |  |
|   | EDUC                  | CATION             |                      |                        |                                   |  |
| Name and Loc  | cation of School      | #of years attended | Did you<br>Graduate? | 5                      | Subjects Studied                  |  |
| High<br>School  |                       |                    |                      |                        |                                   |  |
| College   |                       |                    |                      |                        |                                   |  |
| Trade or<br>Business  |                       |                    |                      |                        |                                   |  |
| Other   |                       |                    |                      |                        |                                   |  |
| •   | 01                    | THER               |                      |                        |                                   |  |
| Have you ever been convicted of a felony?  If Yes, please explain | Yes No                |                    |                      |                        |                                   |  |
|   |                       |                    |                      |                        |                                   |  |

## PLEASE LIST YOUR EMPLOYMENT STARTING WITH YOUR MOST RECENT JOB

|                     | WORK HIS           | TORY                 |
|---------------------|--------------------|----------------------|
| Company Name:       |                    | Job Title:           |
| Address:            |                    | Dates of Employment: |
| Phone Number:       | Supervisor's Name: | Beginning Salary:    |
| Reason for leaving: | •                  | Ending Salary:       |
| Duties:             |                    | •                    |
|                     |                    |                      |
|                     |                    |                      |
| Company Name:       |                    | Job Title:           |
| Address:            |                    | Dates of Employment: |
| Phone Number:       | Supervisor's Name: | Beginning Salary:    |
| Reason for leaving: | •                  | Ending Salary:       |
| Duties:             |                    |                      |
|                     |                    |                      |
|                     |                    |                      |
| Company Name:       |                    | Job Title:           |
| Address:            |                    | Dates of Employment: |
| Phone Number:       | Supervisor's Name: | Beginning Salary:    |
| Reason for leaving: | •                  | Ending Salary:       |
| Duties:             |                    | •                    |
|                     |                    |                      |
|                     |                    |                      |

| _                             | other information you would like for us to consider? (i.e., Special Courses, Training, or Seminars you've completed lachines or Tools you can operate).   |
|-------------------------------|---|
|                               |   |
|                               |   |
|                               |   |
|                               |   |
| Are you flue<br>If yes, pleas | ent in any other language? Yes No<br>se explain:  |
| Number of                     | years in Lincoln County: Years in Colorado:   |
|                               |   |
| Provide the                   | ree references: List name, address and phone number where they may be contacted   |
|                               |   |
|                               |   |
|                               | PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING   |
| 1)                            | I certify that all information that is provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.  |
| 2)                            | I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employers (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions or copies of documents from my personnel file that may be useful in making a hiring decision. I release such persons, organizations and employers from any legal liability in making such statements or providing such documents. |
| 3)                            | I understand I may be required to successfully pass a drug screen examination. I hereby consent to a post-job offer or pre-<br>employment drug screen as a condition of employment if it's required in the job description for the position for which I am<br>applying  |
| 4)                            | Do you have any physical or mental conditions that would limit your abilities to perform the essential job functions, with or without accommodation, listed in the job description for the job for which you are applying? Yes No   |
| 5)                            | I understand that this application or subsequent employment does not create a contract of employment nor guarantee employment for any definite period of time. If employed, I understand that I have been hired at the will of the employer and my employment may be terminated at any time, with or without cause, and with or without notice.   |
| 6)                            | I have read, understand and, by my signature, consent to these statements.  |
| Signature:                    | Date:   |

## ADDENDUM TO LINCOLN COUNTY JOB APPLICATION

Per C.R.S. 24-5-101 (1) (a), the fact that a person has been convicted of a felony or other offense involving moral terpitude shall not, in and of itself, prevent the person from applying for and obtaining public employment or from applying for and receiving a license, certification, permit, or registration required by the laws of this state to follow any business, occupation or profession. This subsection shall not apply to any person wanting to hold an office of trust or profit per Section 4 of Article XII of the Colorado Constitution, the certification and revocation of certification of peace officers as provided in C.R.S. 24-31-305, or the employment of personnel in positions involving direct contact with vulnerable persons as specified in C.R.S. 27-90-111.

| If you are an applicant for a position with Lincoln County that includes one of the exceptions noted in C.R.S. 25-5-101 (1) (a), you may add clarifying or explanatory information for any and all things listed or reported or that may appear in a criminal background check. |
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