Application for Employment

Barnes County Highway Department 1525 12th St. NW, Valley City, ND 58072 (701) 845-8508

Upon completion, download PDF and email to jsmith@barnescounty.us with APPLICATION as the subject or mail to the Barnes County Highway Department ATTN: Jamie Smith, County Road Superintendent at P.O. Box 306 Valley City, ND 58072.

Position(s) applying for:					
General Information					
Name (Last, First, Middle Initial)			phone Number	Number Cell Phone Number	
Mailing Address	City	State	Zip Code	Email Address	
Have you ever been convicted of If yes, please explain:			violation?	Yes No	
Can you provide proof, if hired,	that you are eligible to w	ork in the	United State	s?YesNo	
Education and/or Training					
Did you graduate from High Sch	nool or receive a GED? _	Yes	No		
Name of school	Course of stu	Course of study		Degree	
If the position you are applying provide the following information	_	n of a moto	or vehicle, pl	ease	
a.) Have you received any moving v If yes, please explain:					
b.) Please indicate valid driver's	s license held: A	B0	C D	M	
d.) Endorsements? H	_ N T P				
Are you capable of performing, of the job for which you are ap			odations, the	essential functions	

•	•	ice and self-employment; any change of job se position. Please make additional copies if yo		
have additional employme	-			
May we contact your curre	ent/former employers for a referenc	re? Yes No		
Employer:	Supervisors Name:	Supervisor's Telephone No.		
Type of Business:	Address:			
Your Job Title:	Dates employed:	Ave. hours worked & Monthly Salary		
Duties:				
Reason for leaving:				
Employer:	Supervisors Name:	Supervisor's Telephone No.		
Type of Business:	Address:			
Your Job Title:	Dates employed:	Avg. hours worked & Monthly Salary		
Duties:				
Reason for leaving:				
Employer:	Supervisors Name:	Supervisor's Telephone No.		
Employer.	Supervisors (vanie.	Supervisor's relephone ivo.		
Type of Business:	Address:			
Your Job Title:	Dates employed:	Avg. hours worked & Monthly Salary		
Duties:				
Reason for leaving:				
misrepresentation, false statement, or c employment. I authorize investigation verify the information that is obtained understand that this employment appli	omission by me in the application or interview proces of all statements made on this application and any at I release all persons, companies, and organizations f cation and other employment related documents are xpressly disavowed. I hereby acknowledge that if off	complete to the best of knowledge. I understand that any willful so will be cause for rejection of my application or termination of my trachments. I authorize Barnes County to contact my reference and from liability for providing or receiving such information. I further not contracts of employment; and, that any oral or written fered a position with Barnes County, my appointment will include a		
Applicant Signature:		Date:		

Employment History: (Provide detail; do not use "see resume")

BARNES COUNTY, NORTH DAKOTA

EQUAL EMPLOYMENT OPPORTUNITY FORM

We invite you to complete the enclosed Equal Employment Opportunity form and return it in a separate envelope from your application.

This information will be forwarded to our Title VI Coordinator and kept completely separate from your application. This information is used for statistical purposes only as part of our ongoing efforts to maintain Title VI compliance.

Submission of this information is completely voluntary and will be kept confidential.

EQUAL EMPLOYMENT OPPORTUNITY

Due to the receipt of federal aid funds, Barnes County is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the County invites you to voluntarily self-identify your race or ethnicity. Submission of this information is voluntary and refusal to provide it will not subject you to any adverse treatments. The information obtained will be kept confidential and may only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to the summarized and reported to the federal government for civil rights enforcement. When reported, data will not identify any specific individual.

This form will not be part of your applicant file or included in any documentation provided to the supervising official.

Please Print Name:
Date: Position for which you are applying:
Date of birth:
Male Female
Racial/Ethnic Heritage (Check one)
Hispanic or Latino – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
White (Not Hispanic or Latino) – A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
Black or African American (Not Hispanic or Latino) – A person having origins in any of the black racial groups of Africa.
Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino) – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
Asian (Not Hispanic or Latino) – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian Subcontinent, including, for example, Cambodia, China, India, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<u>American Indian or Alaska Native (Not Hispanic or Latino)</u> – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
Two or More Races (Not Hispanic or Latino) – All persons who identify with more than one of the above five races.
How did you learn about the job for which you applied? (List the name of the newspaper, employment agency, organization, agency employee, or other source):

We are an Equal Opportunity Employer