



ROBERTS COUNTY Employment Application

411 2nd Ave E, Sisseton, SD 57262

AN EQUAL OPPORTUNITY EMPLOYER: Applications are considered without regard to race, color, religion, sex, national origin, age, disability or any other prohibited basis of discrimination, as provided under state and federal law.

PERSONAL INFORMATION

DATE: _____

Name: _____

Social Security Number: _____ - _____ - _____

Address: _____

Telephone Number: _____

Are you legally eligible for employment in the USA? Yes No

Position applied for: _____

Rate of Pay: _____

Were you previously employed by Roberts County? _____

If yes, when? _____

If your application is considered favorably, on what date will you be available to work? _____

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with Roberts County? _____

RECORD OF EDUCATION

School	Name and Address of School	Course of Study	Years completed	List Diploma or Degree
High School	_____	_____	_____	_____
College	_____	_____	_____	_____
Other (specify)	_____	_____	_____	_____

List below all present and past employment, beginning with your most recent.

Name & Address of Company	From M/Yr	To M/Yr	Salary	Reason for leaving	Supervisor	Include Phone Number
1. _____	_____	_____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____	_____	_____

I hereby give permission to contact the employers listed above concerning information you deem relevant.

Signed: _____

If there is a particular employer(s), you do not wish us to contact, please indicate which one(s).

PERSONAL REFERENCES (Not former employers or relatives)

Name & Occupation Address: Phone Number:

- 1.
- 2.
- 3.

MILITARY SERVICE RECORD

Were you in the U.S. Armed Forces? Yes/ No If Yes, what branch?

Dates of duty: From _____ To _____ Rank at discharge _____

APPLICANTS STATEMENT: I understand and agree that any misrepresentation by me in this application will be sufficient cause for rejection of this application and/or termination of employment if I am hereafter employed by Roberts County. Furthermore, if I am hired, I understand that I am free to resign at any time by submitting a written notice two weeks in advance to the Department head or the Roberts County Commission. Roberts County reserves the right to terminate employment at any time by giving me two weeks written notice of intended action. I understand that no representative of Roberts County has authority to make any representations or assurances to the contrary. I understand that I may be requested to submit to a test to detect the current illegal use of drugs and if the test results identify that I am a current illegal user, I will not be eligible for employment by Roberts County. I further understand that I have the right to refuse to submit to such tests or to consent to such tests of my own free will.

I authorize Roberts County to make a thorough investigation and background check of my past employment, education and job related activities. To the extent permitted by law, I release Roberts County from any liability which might result from making such investigation and I also release from any liability all persons and entities supplying such information. I acknowledge that Roberts County is an equal opportunity employer and that Roberts County does not discriminate in employment. I understand that no question on this application is used for the purpose of limited or excluding Roberts County's consideration of me for employment on a basis prohibited by federal, state or local information prohibited by federal, state or local law. I understand that Roberts County will consider this application to contain current information for a period of only sixty days. All job openings will be advertised in the County's designated newspapers. I understand that no person shall be hired in a position where he/she shall be supervised by or receive supervision from a relative as defined by brother, sister, mother, father, son, daughter, grandson, granddaughter, or any of the preceding who are in that capacity as in-laws, or any other member of the prospective employee's household.

Signature: _____

Date: _____
