

EMPLOYMENT HISTORY Provide your work experience starting with your present or last job. Include any job-related military service assignments and volunteer activities. *Exclude organizations that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve national guard or any other similarly protected status.*

From / To _____ Employer/Organization _____

Telephone # _____ Address _____

Job title: _____ Supervisor _____ May We Contact? _____

Job duties/
Responsibilities _____

Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____

Telephone # _____ Address _____

Job title: _____ Supervisor _____ May We Contact? _____

Job duties/
Responsibilities _____

Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____

Telephone # _____ Address _____

Job title: _____ Supervisor _____ May We Contact? _____

Job duties/
Responsibilities _____

Reason for leaving _____ Final Rate of Pay: _____

From / To _____ Employer/Organization _____

Telephone # _____ Address _____

Job title: _____ Supervisor _____ May We Contact? _____

Job duties/
Responsibilities _____

Reason for leaving _____ Final Rate of Pay: _____

PLEASE EXPLAIN ANY GAPS IN EMPLOYMENT:

Have you ever been fired or asked to resign from a job? _____ If yes, please explain: _____

EDUCATION

	Name and Address of School	Course of Study	Years Completed	Diploma / Degree Obtained
High School				
Undergraduate College				
Graduate Professional				
Other (specify)				

RELATED INFORMATION: To what job related organizations (professional, trade, etc.) do you belong?
Exclude memberships that would reveal race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran / reserve national guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

Please explain why you would like to be considered for employment with Erie County. Use additional sheets if needed.

REFERENCES: Please provide at least 3 professional references who are not related to you. Use additional sheets if necessary.

NAME: _____ PHONE: _____

EMAIL: _____ RELATIONSHIP: _____

NAME: _____ PHONE: _____

EMAIL: _____ RELATIONSHIP: _____

NAME: _____ PHONE: _____

EMAIL: _____ RELATIONSHIP: _____

Have you been provided with a written job description for the position which you are applying?

Yes **No**

Are you capable of performing the essential duties, responsibilities, and functions of the job for which you have applied?

Yes **No**

APPLICANT STATEMENT AND SIGNATURE (Signature Required for Application to be Complete):

I certify that all information I have provided in order to apply for and obtain employment with Erie County is true, complete, and correct. I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with Erie County and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from County service, whenever it is discovered. In addition, I give Erie County the right to investigate and verify any information obtained through the application process. Permission is granted and I release from any and all liability any employer, agency or individual assisting Erie County in providing relevant, job related information that will assist in this process. I expressly authorize, without reservation, Erie County, its representatives, members or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application. I hereby waive any and all rights and claims I may have regarding Erie County, its agents, members or representatives, for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information about me.

I understand that an offer of employment may be contingent upon the successful completion of a pre-employment background criminal investigation, physical, psychological, polygraph, and/or drug and alcohol screen. If employed, I agree to provide proof of identity, relevant licensure or credentials, and authorization for employment in the United States. If I am hired, I understand that, unless otherwise defined by applicable law, any employment relationship with Erie County is of an "at will" nature, which means that I am free to resign at any time and Erie County reserves the same right to terminate my employment at any time. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that all conditions of employment including, but not limited to hours, benefits and salary are subject to change by Erie County at any time. I understand that no representative of Erie County is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the appropriate Appointing Authority.

I understand that a new application must be completed for any future job postings or employment opportunities with Erie County.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.
I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant (required): _____ **Date:** _____

THIS BOX FOR OFFICE USE ONLY:

INTERVIEW: (1) _____ (2) _____

Pre-Emp Testing: Background: _____ Physical: _____ Drug Screen: _____

START DATE: _____ / _____ / _____

WAGE: _____

Received:

Time Stamp

Affirmative Action Voluntary Information

COMPLETION OF THIS FORM IS VOLUNTARY

PLEASE PRINT

All applicants are considered for positions without regard to race, color, religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve/national guard or any other similarly protected status. We also comply with all applicable laws governing employment practices and do not discriminate on the basis of any unlawful criteria.

To be completed by applicant on a voluntary basis. Not for interview purposes. To be filed separately from application.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is **STRICTLY VOLUNTARY**. Failure to provide it will not subject you to any adverse personnel decision or action. Your cooperation is appreciated.

Please be advised that this survey is NOT part of your official application for employment. It will not be used in any hiring decision. The information will be used and kept confidential in accordance with applicable laws and regulations. ***This information is not provided to the appointing authority and is kept separate from your application.***

Position (s) applied for: _____ Date: ____ / ____ / ____

Referral Source:

- Walk In Government Employment Agency Private Employment Agency
 Employee: _____ School
 Relative: _____
 Newspaper: _____
 Other: _____

Applicant Information

Male Female Disabled? Yes No

Veteran? No Yes: Vietnam Veteran Special Disabled Veteran Other Eligible Veteran

Please Check One of the Following Equal Employment Opportunity Identification Groups:

- Hispanic or Latino
 White (not Hispanic or Latino)
 Black or African American (not Hispanic or Latino)
 Native Hawaiian or Other Pacific Islander
 Asian (not Hispanic or Latino)
 American Indian or Alaska Native (not Hispanic or Latino)
 Two or more races (not Hispanic or Latino) - all persons who identify with more than one of the above

For Administrative Use Only OCRC Job Classifications:

- Officials / Administrators Professional Technicians Protective Service
 Para Professional Administrative Support Skilled Craft Service / Maintenance

Completed By: _____ Date: _____