



**Application for Employment
Greenbrier County Commission
Greenbrier County Courthouse
200 Court Street North
Lewisburg WV 24901**

Equal access to programs, services and employment is available to all persons. We are an equal opportunity employer.

Position(s) applied for: _____

Type of employment desired: Full-time Part-time Temporary

PERSONAL INFORMATION

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ City: _____ State: _____ ZIP code: _____

Phone: _____ Social Security Number: _____ E-mail: _____

Are you legally eligible for employment in this country? Yes No

NOTE: Upon hire, applicants will be required to present documents proving identity and eligibility to work in the United States as required by the Immigration Reform and Control Act of 1986.

Date available for work: _____

Have you ever worked for Greenbrier County? Yes No

If so, which department? _____ When? _____

Do you have a valid driver's license? Yes No

Have you ever been convicted of any offense against the law? (Omit juvenile offense and minor traffic violations. Include convictions by general court martial while in the military service.) Yes No (If yes, give date, place, charge, court and fine or sentence.)

NOTE: A conviction does not automatically mean that you cannot be employed. The nature and date of the conviction are important. Give all of the facts so that a decision can be made.

Are you able to fully perform the essential functions of the job for which you are applying? Yes No (If no, please explain.)

NOTE: A disability will not bar a qualified applicant from employment if the applicant is able to perform the essential functions of the job with or without reasonable accommodation.

EDUCATION

Highest grade completed: _____

Name and location of the last high school you attended:

Did you graduate? Yes No If not, have you passed a GED test? Yes No

	School Name & Location	From	To	Date Graduated	Degree/Certificate	Major Area of Study
College or University						
Other Education						

Special qualifications and skills: (keyboarding, computer skills, professional licenses and certificates, kinds of office or construction equipment you can operate, publications, scholastic honors, etc.)

EXPERIENCE AND REFERENCES

EXPERIENCE: Start with your present job and work back. Include military service, part-time, temporary employment and relevant volunteer experience. Additional experience should be listed by attaching separate sheets of paper or a personal resume. Be sure to include all requested information.

Employer Address Phone	Job Title	Supervisor's Name	Date of Hire	End Date of Employment	Reason for Leaving

Please give a brief description of your duties:

May we contact for reference? Yes No Later

Employer Address Phone	Job Title	Supervisor's Name	Date of Hire	End Date of Employment	Reason for Leaving

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Please give a brief description of your duties:

May we contact for reference? Yes No Later

Name	Phone	Years known

It is understood and agreed upon that any misrepresentation by me on this application will be sufficient cause for cancellation of this application and/or separation from the employer's service if I have been employed.

I give the employer the right to investigate all references and to secure additional information about me, if job-related. I hereby release from liability the employer and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

The employer is an Equal Opportunity Employer. The employer does not discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant's consideration for employment on a basis prohibited by local, state and federal law.

This application is current for only 60 days. At the conclusion of this time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, the employer reserves the right to terminate my employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the authority to make any assurances to the contrary.

I understand it is this company's policy not to refuse to hire a qualified individual with a disability because of this person's need for an accommodation that would be required by the ADA.

Signature of Applicant: _____ Date: _____