

**BEADLE COUNTY**  
PO Box 845  
HURON, SD 57350  
605-353-8400 phone  
605-353-8402 fax

POSITION APPLIED FOR:

## APPLICATION FOR EMPLOYMENT

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

ADDRESS: \_\_\_\_\_  
STREET/PO BOX CITY STATE ZIP

CONTACT: \_\_\_\_\_  
HOME PHONE BUSINESS/MESSAGE/CELL EMAIL ADDRESS

**Please answer all questions. Answers are subject to verification.**

Are you under age 18?  Yes  No Are you related to a Beadle County employee?  Yes  No

Are you a U.S. citizen or currently authorized to work in the United States on a full-time basis?  Yes  No

If the position requires driving, do you have a valid driver's license?  Yes  No

If yes, do you have a commercial driver's license?  Yes  No

If you have a valid driver's license of ANY KIND, please indicate the following: \_\_\_\_\_  
State Number

Have you ever been convicted of or pled guilty or nolo contendere/no contest to any crime other than traffic offenses for which no court appearance was required?  Yes  No

If yes, please explain: \_\_\_\_\_

**Note:** A conviction will not automatically disqualify an applicant. The employer will consider the type and seriousness of the crime, the frequency of violations, the applicant's age at the time of conviction, and the date of conviction or time elapsed since the conviction or completion of any jail sentence in addition to other job-related criteria. Failure to disclose convictions may result in disqualification.

***In accordance with the Federal Department of Transportation and the policy of Beadle County, the County conducts urine drug screening for pre-employment and at prescribed times. If you refuse testing or test positive (evidence of drug usage), your offer of employment will be withdrawn. Beadle County also complies with the Drug-Free Workplace Act of 1988.***

### AUTHORIZATION FOR RELEASE OF INFORMATION

As a part of the Beadle County employment process, we may be checking your background relative to job and personal references, criminal record, and social services record. In order to do that, we must have your authorization.

The undersigned hereby authorizes any state department of social services, any police department, and Beadle County, to obtain and/or release any and all information regarding social services, work, credit, DOT mandated drug/alcohol testing if applicable, or criminal history of the undersigned applicant for consideration for employment by Beadle County. The undersigned also understands that misrepresentation or omission of facts called for in this application is cause for cancellation of the application and/or separation from employment.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date



## EMPLOYMENT HISTORY

Resume accepted in lieu of this section if requested information is provided.

★ Start with your current or last job - include armed forces service and self-employment.

May we contact your current employer?			<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not Applicable
1. Employer		Telephone Number	Supervisor's Name		
Type of Business		Address			
Your Job Title		From:	Dates Employed	To:	Average Hours Worked Per Week
Duties:					
Monthly Salary	Reason for Leaving				
2. Employer		Telephone Number	Supervisor's Name		
Type of Business		Address			
Your Job Title		From:	Dates Employed	To:	Average Hours Worked Per Week
Duties:					
Monthly Salary	Reason for Leaving				
3. Employer		Telephone Number	Supervisor's Name		
Type of Business		Address			
Your Job Title		From:	Dates Employed	To:	Average Hours Worked Per Week
Duties:					
Monthly Salary	Reason for Leaving				

**PROFESSIONAL REFERENCES: Name / Title / Address / Phone**

**1** \_\_\_\_\_

**2** \_\_\_\_\_

**3** \_\_\_\_\_

I certify that the information is true, correct and complete to the best of my knowledge. I authorize investigation of all statements I have made. I understand that the misrepresentation, falsification, or omission of facts in this application is cause for cancellation of this application or termination of employment. I understand that this application is not a contract of employment.

**Unsigned applications will not be considered.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

### VOLUNTARY INFORMATION

Beadle County is an Equal Opportunity Employer. While you are not required to do so, we are requesting that you complete the following questions to help us measure our effectiveness in meeting our EEO obligations. This is a voluntary act on your part and will not, in any way, harm or assist you with your relationship with the County. This questionnaire is removed from your application before it is evaluated. The data collected will remain in our files but will not be used in any way other than statistical reporting. Thank you for helping us evaluate our recruitment and selection procedures.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Position applied for: \_\_\_\_\_

Date of Birth: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Sex: \_\_\_\_\_ Male \_\_\_\_\_ Female

Race/Ethnic Group:

\_\_\_\_\_ American Indian - Alaskan Native \_\_\_\_\_ Hispanic

\_\_\_\_\_ Asian - Pacific Islander \_\_\_\_\_ White

\_\_\_\_\_ Black \_\_\_\_\_ Other

Check if applicable: \_\_\_\_\_ Veteran \_\_\_\_\_ Disabled Veteran \_\_\_\_\_ Vietnam Era Veteran

Dates of service: From: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ To: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Branch: \_\_\_\_\_ Discharge: \_\_\_\_\_

Disability: Do you have a physical or mental impairment that limits one or more of your major life activities (e.g. walking, hearing, seeing, breathing, and learning)?  Yes  No



Please help us provide the best service possible to our job applicants by answering the following questions. The information will not be shared with other agencies, but will be used to evaluate and improve our service. Thank you for your assistance.

How did you learn about this position? (Please check only one.)

- Newspaper
- South Dakota Career Center
- Internet Site: \_\_\_\_\_
- Current Beadle County employee
- Affirmative Action Agency
- South Dakota Bar Association newsletter
- Job Fair
- Other \_\_\_\_\_

Were you treated courteously when requesting job information?  Yes  No

Was the job information readily available upon request?  Yes  No

Was the job information easily understood?  Yes  No

If you answered "no" to any of the above, please explain.

\_\_\_\_\_