



**P.O. Box 987 Selma, AL 36702 (334) 877-2795**

## Employment Application

The Dallas County Commission is an equal opportunity employer, and applicants will be considered without regard to their race, color, religion, sex, national origin, age, veterans status, or disability. We appreciate your interest in employment with Dallas County and assure you we are interested in your qualifications. A clear understanding of your background and work history will aid us in placing you in a position that best meets your qualifications. Please fill this application form out carefully and completely. Submission of a resume **will not** substitute for completing this application.

Job Applicants applying for a "Designated Safety Sensitive Position" are required to submit to Drug Testing at or near the final stage of the hiring process.

Any offer of employment will be conditional upon a **NEGATIVE** drug test result.

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

Name: \_\_\_\_\_  
Last First Middle

Any other name used: (nickname, assumed, etc.) \_\_\_\_\_

Street Address: \_\_\_\_\_  
Number Street City State Zip Code

Mailing Address: \_\_\_\_\_  
Number of P.O. Box Street City State Zip Code

Telephone Number: ( ) \_\_\_\_\_ Social Security #: \_\_\_\_\_

POSITION(s) Applied For: \_\_\_\_\_

Are you available to work \_\_\_\_\_ Full Time \_\_\_\_\_ Part-time \_\_\_\_\_ Temporary  
\_\_\_\_\_ Shift Work \_\_\_\_\_ Other: \_\_\_\_\_

On what date are you available for work? \_\_\_\_\_

Are presently employed? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are you legally eligible to work in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you ever been convicted of an offense other than a minor traffic violation?  
Criminal convictions are not an absolute bar to employment but will be considered in  
relation to specific job requirements. \_\_\_\_\_ Yes \_\_\_\_\_ No

If Yes, please explain: \_\_\_\_\_

**AN EQUAL OPPORTUNITY EMPLOYER**



DALLAS COUNTY  
APPLICATION FOR EMPLOYMENT

EMPLOYMENT RECORD:

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**#1 Present or Most Recent Employer:**

Employer Name: \_\_\_\_\_ Telephone: (     ) \_\_\_\_\_

Address: \_\_\_\_\_  
                    Number                      Street                      City                      State                      Zip Code

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Was your employment: \_\_\_\_\_ Full Time                      Part-time (avg. hours per week: \_\_\_\_\_)

Describe your duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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**#2 Previous:**

Employer Name: \_\_\_\_\_ Telephone: (     ) \_\_\_\_\_

Address: \_\_\_\_\_  
                    Number                      Street                      City                      State                      Zip Code

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Was your employment: \_\_\_\_\_ Full Time                      Part-time (avg. hours per week: \_\_\_\_\_)

Describe your duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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**#3 Previous:**

Employer Name: \_\_\_\_\_ Telephone: (     ) \_\_\_\_\_

Address: \_\_\_\_\_  
                    Number                      Street                      City                      State                      Zip Code

Supervisor's Name: \_\_\_\_\_ Title: \_\_\_\_\_

Your Job Title: \_\_\_\_\_

Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_

Was your employment: \_\_\_\_\_ Full Time                      Part-time (avg. hours per week: \_\_\_\_\_)

Describe your duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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May we contact the employers listed above? \_\_\_\_\_ Yes                      \_\_\_\_\_ No

If NO, indicate the employers you do not wish us to contact: \_\_\_\_\_

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EDUCATION:

Name of High School: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Did you graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No

Mark which diploma: \_\_\_\_\_ Advanced \_\_\_\_\_ General \_\_\_\_\_ Certificate of Completion

Have you completed the requirements for a General Education Diploma (G.E.D.)? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, state where received: \_\_\_\_\_

Name of College: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Years Completed: 1 2 3 4 5 6

Did you graduate? \_\_\_\_\_ Yes \_\_\_\_\_ No

Major: \_\_\_\_\_ Degree: \_\_\_\_\_

Name of Graduate School: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Did you Graduate? \_\_\_\_\_ Yes \_\_\_\_\_ No

Area of Study: \_\_\_\_\_ Degree: \_\_\_\_\_

Vocational Technical School: \_\_\_\_\_

Years Completed: 1 2 3 4 5 6

Did you graduate? \_\_\_\_\_ Yes \_\_\_\_\_ No

Area of Study: \_\_\_\_\_ Degree: \_\_\_\_\_

Other Formal Education: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Years Completed: 1 2 3 4 5 6 Did you graduate: \_\_\_\_\_ Yes \_\_\_\_\_ No

Area of Study: \_\_\_\_\_ Degree: \_\_\_\_\_

SPECIALIZED TRAINING / SKILLS:

Typing: \_\_\_\_\_ /wpm Shorthand: \_\_\_\_\_ / wpm

Can you operate: \_\_\_\_\_ Calculator \_\_\_\_\_ Dictaphone \_\_\_\_\_ Multi-line Telephone System

\_\_\_\_\_ Copier \_\_\_\_\_ Word Processor \_\_\_\_\_ Data Entry Terminal

List any other training, skills or aptitudes which you feel are related to the type of employment you are seeking with the County:

Do you have a valid Driver's License: \_\_\_\_\_ Yes \_\_\_\_\_ No

License Number: \_\_\_\_\_ State: \_\_\_\_\_ Type: \_\_\_\_\_

Have you ever been employed by the Dallas County Commission? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, state: Supervisor's Name: \_\_\_\_\_ Department: \_\_\_\_\_

Your position: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for termination: \_\_\_\_\_



**DALLAS COUNTY  
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**MILITARY SERVICE**

Have you served in the U. S. Military Service: \_\_\_\_\_ Yes \_\_\_\_\_ No  
Dates of active service: From: \_\_\_\_\_ To: \_\_\_\_\_  
Branch of Service: \_\_\_\_\_ Type of Duty: \_\_\_\_\_

Describe any special training or skills acquired in the Services: \_\_\_\_\_  
\_\_\_\_\_

List memberships in any professional organizations which you feel would enhance your application: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT'S STATEMENT**

Read Carefully:

The information contained in this application is correct and accurate to the best of my knowledge. I understand that employment is subject to: verification of applicable lawful age, legal right to remain permanently in the United States and physical examination and condition; and I will furnish and submit such lawful proof, documents and permits as may be necessary to verify the same, I hereby agree to submit to medical examination based on the essential functions of the job after a conditional job offer has been made. I authorize: (A): Investigation of the information contained in this application, of other matters concerning my past employment, credit, educational records, or other activities, (B) The issuance of credit and consumer reports or other statements which may be furnished or obtained concerning the same. I hereby release from any and all liability and responsibility all persons, companies and corporations supplying such information and Dallas County in obtaining the same. Dallas County will comply with the American with Disabilities Act of 1990. The County will attempt to provide reasonable accommodations for a qualified individual with a disability as defined by ADA and is capable of performing the essential job functions with or without reasonable accommodation, unless undue hardship to the County or direct threat to the employee or others would result.

I agree to use such personal protection equipment and devices as may be required by the County and to comply with safety rules and requirements. I understand that any misleading or incorrect statements may render this application void and in the event of my employment would be cause for immediate dismissal.

I have carefully read the above and fully understand the same.

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

**AUTHORIZATION FOR RELEASE OR EMPLOYMENT INFORMATION**

Applicant:

This will authorize all previous employers of mine to provide Dallas County with any information that Dallas County may request. I hereby authorize each previous employer of mine to give to the Dallas County any information in my personnel file that the County may request, including, but not limited to disciplinary actions, attendance records, reports relative to training and education, and any other information available concerning my previous employment. Dallas County may obtain an investigative report that includes information obtained through personal interviews with supervisors and business associates with any previous employer of mine. The personal interviews may seek information about my past job performance reliability, character, personal characteristics, and general reputation.

I understand that if I am hired, the County may terminate my employment during the probationary period, or at any other time with or without cause. I understand that no promise of employment for a particular length of time has been made to me. I further understand that no manager, supervisor, employer or other county representative has the authority to promise employment for a particular length of time or to make any other promise or representations about my future employment with the County.

I have read and understand the application and all information contained herein.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

**DALLAS COUNTY COMMISSION (EMPLOYMENT APPLICATION) (Cont'd)**

**REFERENCES**

Please list at least three (3) professional references. A professional reference is someone who is either a past employer or someone who knows your professional capabilities (i.e., supervisors, co-workers, former teachers, etc). Please do not use immediate family members as personal references.

<u>NAME</u>	<u>PHONE NUMBER</u>	<u>RELATIONSHIP</u> ( <u>how this person knows you</u> )
1. _____	(    ) _____	_____
2. _____	(    ) _____	_____
3. _____	(    ) _____	_____
4. _____	(    ) _____	_____
5. _____	(    ) _____	_____