

HOPKINS COUNTY JAIL

An Equal Opportunity Employer
APPLICATION FOR EMPLOYMENT

It is the policy of the Hopkins County Jail to provide employment, training, compensation, promotion, and other conditions of employment based on qualifications, without regard to race, color, religion, national origin, sex, age, marital or veteran status, the presence of non-job-related disability, or any other legally protected status.

(Print Only)	Date of Application				
		Date of	Аррисации		
Last Name	First Name		Ir	Initial	
Street Address		City	State	Zip Code	
Primary Phone No.	Alternate Phone No				
E-mail address					
How did you find out about job opening?					
EDUCATION AND TRAINING	<u>Address</u>	<u>Degree</u>		Grade <u>Completed</u>	
Elementary					
High School					
College					
Technical, military or vocational school					
OTHER ACTIVITIES					
May exclude membership which would revea	l sex, religion, nationa	al origin, age, ancestry, or other	er protected status		
SPECIAL SKILLS AND QUALIFICATIO	NS				
Summarize special job-related skills and quali	fications acquired fro	m employment or other exper	ience.		
MILITARY					
Have you served in the military? Yes	No	Branch of service			
Final rank	Type of disc	harae			

Employment History, beginning with the most recent

Employer:		Phone Number:		
Address:		Supervisor:		
Job Title:	Highest Salary:	Start Date:	End Date:	
Brief Description of Duties:				
Reason for Leaving:			May We Contact:	YES or NO
Employer:		Phone Number:		
Address:		Supervisor:		
Job Title:	Highest Salary:	Start Date:	End Date:	
Brief Description of Duties:				
Reason for Leaving:			May We Contact:	YES or NO
Employer:		Phone Number:		
Address:				
Job Title:				
Brief Description of Duties:				
Reason for Leaving:			May We Contact:	YES or NO
Employer:		Phone Number:		
Address:				
Job Title:				
Brief Description of Duties:				
Reason for Leaving:			May We Contact:	YES or NO
Employer:		Phone Number:		
Address:				
Job Title:				
Brief Description of Duties:				
Reason for Leaving:				YES or NO
Employer:		Phone Number:		
Address:				
Job Title:				
Brief Description of Duties:				
Reason for Leaving:			May We Contact:	YES or NO

REFERENCES

		<i>time telephone number</i> and the best time to contact five people who can provide a personal reference. Do not use vious employers.
1.		
5		
Do you	ı know aı	nyone who works at the Hopkins County Jail? No Yes (list names)
YES	<u>NO</u>	
		Are you 21 years of age or older?
		Do you have a valid driver's license?
		Do you have a High School Diploma or G.E.D?
		Do you have a Social Security card?
		Are you legally eligible for employment in the U.S.?
		Can you provide documentation verifying your eligibility? Are you able to perform the essential duties and responsibilities of the position for which you are applying with or
		without accommodation?
		Since the age of 18, have you been convicted of a felony?
		Since the age of 18, have you been convicted of a misdemeanor?
		If yes, please give dates, charges and an explanation
immed	iate discl	at any false information made by me on this application, or any supplement document, will be sufficient grounds for narge if I am employed. Under the "Freedom of Information Act", I give my permission for the Hopkins County Jail to of my employment records retained by any of the above named employers.
Applic	ant's sig	nature Date
		Hiring Process
1. I	f vour an	plication is selected you may be contacted to schedule an interview.
		byment Screening begins if we considered you for employment after the interview:
	-	background check and driver's license check.
•	A co	by of your driver's license
•	-	by of your DD-214 if applicable.
•	_	by of your High School Diploma or G.E.D.
•		rgo a urinalysis (drug screen).
•	Pass	a medical examination.
1		Applications will be kept on file for six months.