

**Lancaster
County**

APPLICATION FOR EMPLOYMENT

PLEASE PRINT ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

ALL EMPLOYMENT WITH LANCASTER COUNTY IS AT-WILL.

Name: _____ Date: _____
Last First Middle Maiden

Present Address: _____
Number Street City State Zip Social Security Number:

Home Telephone: _____ Cell/Mobile/Pager Number: _____
(or a number to contact you for additional information as it relates to this application)

Position for which you are applying:

Are you at least 18 years of age (or 21 years of age if applying for a law enforcement position)? Yes No

Employment desired: FULL-TIME ONLY PART-TIME ONLY FULL- OR PART-TIME

Enter date you are available to start work: _____ Minimum desired compensation: _____

Have you ever been convicted of or pled guilty or no contest to any crime other than a minor traffic violation? (A "Yes" answer does not necessarily disqualify an applicant.) No Yes If yes, provide details below.

Have you ever been discharged or asked to resign from any job? (A "Yes" answer does not necessarily disqualify an applicant.) No Yes If yes, provide details below.

Are you related to any County Council member or County employee? No Yes If yes, provide name and relationship:

Do you have a valid driver's license? Yes No Type: CDL (Commercial) Class _____ State: _____

Have you had any accidents during the past three years? Yes If so, how many?
 (A "Yes" answer does not necessarily disqualify an applicant.) No

Have you had any moving violations during the past three years? Yes If so, how many?
 (A "Yes" answer does not necessarily disqualify an applicant.) No

Describe experience you may have with equipment, office machines, computers or software that you feel applicable to the position for which you are applying.

If you served in the Armed Forces, did you receive other than an honorable discharge? Yes No |
 (A "yes" answer does not necessarily disqualify an applicant.) If yes, please explain below

WORK EXPERIENCE (Please list your last 4 positions beginning with the most recent.)			
Name of employer:		Last Supervisor:	
Address:		Employment Dates:	From: To:
Telephone:	Last Job Title:		Last Salary:
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used/learned, advancements or promotions while you were with this employer.			
If the above employer is your current employer, may we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Name of employer:		Last Supervisor:	
Address:		Employment Dates:	From: To:
Telephone:	Last Job Title:		Last Salary:
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used/learned, advancements or promotions while you were with this employer.			
Name of employer:		Last Supervisor:	
Address:		Employment Dates:	From: To:
Telephone:	Last Job Title:		Last Salary:
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used/learned, advancements or promotions while you were with this employer.			
Name of employer:		Last Supervisor:	
Address:		Employment Dates:	From: To:
Telephone:	Last Job Title:		Last Salary:
Reason for leaving (be specific):			
List the jobs you held, duties performed, skills used/learned, advancements or promotions while you were with this employer.			

**LANCASTER COUNTY EMPLOYMENT APPLICATION
APPLICANT'S APPLICATION CERTIFICATION**

PLEASE READ CAREFULLY

In exchange for the consideration of my job application by the County of Lancaster (hereinafter called "County"), I agree that:

Neither the acceptance of this application nor subsequent entry into any type of employment relationship, either in the position applied for or any other position, nor the contents of employee handbooks, manuals, benefits plans or policy statements creates an actual or implied contract of employment. Likewise, no such circumstances or documents confer any right to remain an employee of the County or to change in any respect the employment-at-will relationship between the County and the undersigned. Both the undersigned and the County may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the County may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in elimination of benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for will result in my application not being further considered or, if employed, in termination of my employment. I hereby give the County permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the County from any liability as a result of such contact.

I understand that any offer of employment with the County is conditioned on the following and that the County findings with regard to any such condition may result in withdrawal of the employment offer.

- 1. All positions – A negative test result for illegal or unauthorized drugs.**
- 2. CDL positions – Results of a medical examination.**
- 3. Applicants applying for driving positions may be required to provide at least a three (3) year driving history from the relevant department(s) of motor vehicles at the applicant's expense and prior to the interview. Any applicant who fails to provide the required vehicle license check may not be considered for employment.**
- 4. Criminal Records and/or Consumer (Credit) checks are conducted on all applicants tentatively selected for hire, and any offer of employment may be revoked, or any employment terminated, based on the results of the checks.**

I certify that all information that I have provided in order to apply for and secure work with this employer is true, complete and correct.

I understand that if I am hired, I will be required to provide proof of identity and legal authorization to work in the United States and that federal immigration laws require me to complete an I-9 form in this regard.

I understand that any information provided by me is found to be false, incomplete or misrepresented in any respect, it will result in elimination of my further consideration for employment or, if employed, in my termination from employment.

Signature of Applicant: _____

Date: _____

******FOR COMMUNICATIONS/ 911 CALL TAKERS/DISPATCHERS ONLY******

I understand, I must furnish my Driver's License information and the state where I am currently registered and I must also furnish my date of birth in order to complete my application process.

OUT OF STATE Driver's License # _____ STATE _____

DATE OF BIRTH _____

Applicants are encouraged to attach a current resume, if available, and may attach additional information if desired. Have you attached a resume or additional information? No Yes

This County is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, national origin, age or disability. Your opportunity for employment with this County depends solely on your qualifications.

Thank you for applying for employment with the County of Lancaster.

Applicant Demographic Data

Federal regulations require the County to collect data regarding the applicants' race, sex, and national origin for purposes of complying with federal non-discrimination laws. We are asking you to voluntarily disclose this data to help the County comply with this obligation. Completion of this portion of the application is **voluntary**. This data **will not** be considered by the county in evaluating your application, nor will your refusal to fill out this portion of the application be held against you. This portion of the application will be removed from the application prior to your application being considered.

Please indicate your Gender: _____ Male _____ Female

Please indicate your ethnicity (race or national origin)

_____ White

_____ Hispanic or Latino

_____ Black or African American

_____ American Indian or Alaskan Native

_____ Asian

_____ Native Hawaiian or Other Pacific Islander

_____ Two or more races