



such information to the Converse County agency that holds the vacancy for which I am applying and to appropriate officials for recruitment purposes. I understand that any offer of employment is conditional upon proof of legal authorization to work in the United States as required by the Immigration Reform and Control Act.

Applicant's Signature \_\_\_\_\_  
Date \_\_\_\_\_

### Experience

In the areas below, please list your past work experience beginning with your most recent employment. Military experience and volunteer work may also be included as employment. NOTE: In order to be considered for employment, you must fill in the information below, accurately and completely. You may submit a resume *in addition* to completing this section. If you need additional space, attach extra copies of this page.

Employer _____ Phone _____ Address _____	From: _____ Month/Day/Year _____
City _____ State _____ Zip _____	To: _____ Month/Day/Year _____
Reason for leaving: _____	Month/Day/Year _____
Job Title _____ Job Duties: _____	Salary: _____ Supervisor's Name: _____

Employer _____ Phone _____ Address _____	From: _____ Month/Day/Year _____
City _____ State _____ Zip _____	To: _____ Month/Day/Year _____
Reason for leaving: _____	Month/Day/Year _____
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Job Title _____ Job Duties: _____	Salary: _____ Supervisor's Name: _____

### Education

High School Graduate: Yes \_\_\_\_\_ No \_\_\_\_\_  
Name and Location of high school (city and state) \_\_\_\_\_  
GED Certificate Number \_\_\_\_\_ GED issued by \_\_\_\_\_  
Are you currently attending school? Yes \_\_\_\_\_ No \_\_\_\_\_  
Level \_\_\_\_\_

### Post High School Education

Including technical, business, professional schools or college/university.

School Name & Location	Major area(s) Of Study	Type of Degree Or Certification

Please list below the specific course work areas at the high school level or beyond, relevant to the position for which you are applying. Also indicate the number of courses you have successfully completed in each area. NOTE: A transcript may *not* be substituted for this section, although you may be required to submit a copy of a transcript.

Course Work Area	No. of Courses	Total Hours of Training

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**Equipment Usage and/or Skills**

**List special equipment or machines you can operate:**

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**List computer programs in which you have a skill, including word processing, spreadsheet, and database programs. Please indicate the name of the specific software:**

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**List special clerical skills, including typing and shorthand:**

**Skill:**

**Typing Speed:**

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**List any additional relevant skills you have:**

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