

**INSTRUCTIONS FOR COMPLETING
PIERCE COUNTY
EMPLOYMENT APPLICATIONS**

Disabled applicants may request any needed accommodations

1. Submit a new application form for each position for which you apply. An original application form is requested, do not submit photocopies.
2. Indicate on the top of page one the position for which you are applying. Failure to indicate a position may cause your application to not be processed accurately.
3. Complete the entire application form. Failure to complete the application form may exclude you from further consideration. You may submit a resume' or other similar information with your application if it pertains specifically to the position you are applying for.
4. Be sure to sign your application, Your signature is verification that the information your are providing is accurate and true. Failure to sign your application may cause you to be removed from consideration.
5. If you are applying for a clerical position, you must complete and return the "Clerical Skills Checklist" form
6. Submit your application by closing date and time. The closing date and time is the time by which the application must be in the possession of Pierce County. Applications received after the deadline will not be considered. If you are returning your application by mail, you are responsible for making sure that you allow sufficient time for it to be delivered before the closing deadline.
7. As soon as practical following the closing date and time, screening of applications will take place. **ONLY THOSE INDIVIDUALS SELECTED FOR PERSONAL INTERVIEW WILL BE CONTACTED.**
8. Once submitted, your application becomes the property of Pierce County. Applicants will not be allowed to change information on their application, except for changes in the applicant's name, address or telephone number.
9. If you have questions about the position, salary, closing date and time, or whether we received your application, you can contact the Personnel Office at the address or number listed below. In order to be fair to all applicants we will not answer questions about other applicants or their qualifications.

**Pierce County Personnel Office
414 W. Main St. PO Box 128
Ellsworth, WI 54011**

**(715) 273-3531 Ext. 6433 or 6430
Fax: (715) 273-6853**

PIERCE COUNTY EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

Date of Application _____

Application for the position of _____ Department _____

Name _____ Date Available _____

Last First Middle

Address _____

Number Street City State Zip

Home Telephone Number _____

Are you at least 18 years of age? _____

Please indicate which types of employment interests you

<u>Permanent</u>	<u>Temporary</u>	
Full Time _____	Full Time _____ until _____	Number where you may be reached _____
Part Time _____	Part Time _____ until _____	

NOTE: This application shall be valid only for the above stated position. 180 days following the application deadline, this application will revert to inactive status but will remain in our files to an additional 180 days. At that time it will be confidentially destroyed.

If the position requires travel, will you be able to provide your own transportation? _____

Valid Driver's License? _____ Valid Commercial License? _____ State _____

Have you been convicted of offenses, which relate reasonably to fitness to perform the particular job for which you are applying?

Yes _____ No _____ If yes, give details below.

Date of Offense	Place	Charges	Penalties	
				A criminal record will not necessarily exclude you from employment. Factors such as age at the time of the offense, rehabilitation efforts and recency and seriousness of the crime will be taken into account. The relationship between the offense and the job will also be weighed.

All positions require a physical examination. Would you agree to have a complete physical at the expense of the County? Yes No

EDUCATION: Highest grade completed (i.e. 12 = High School Degree): _____
 Did you graduate from High school or complete a GED? _____

Where? _____ When? _____

List any schools beyond high school that you have attended (college, vocational, business).

Name and Location	Dates From:	Attended To:	Credits Earned Sem. or Qtr.	Major	Type of Degree	Date of Degree

SPECIAL SKILLS AND QUALIFICATIONS Please list all current professional credentials, licenses or certificates

Please list any organizations to which you belong or have belonged and any honors or awards you have received that you regard as relevant to the job or jobs for which you are applying

WORK EXPERIENCE Provide a complete description. This information will be used to determine if your application is accepted. Be specific. Start with your most recent job. Include service in the armed forces and any self-employment. For part-time work, show the average number of hours per month. Indicate any changes in job title and duties under the same employer as a separate position.

PRESENT OR MOST RECENT EMPLOYER	KIND OF BUSINESS	LOCATION (CITY AND STATE)	
YOUR TITLE	REASON FOR LEAVING OR CONSIDERING LEAVING	REFERENCE: NAME, TITLE & PHONE #	
YOUR DUTIES		TOTAL TIME EMPLOYED if part-time number of hours/month	Full Time <input type="checkbox"/> Part time <input type="checkbox"/>
		FROM (MO/ & YR.)	TO (MO/ & YR.)
		Salary: Beginning	Ending
		EMPLOYER	
YOUR TITLE		LOCATION (CITY AND STATE)	
YOUR DUTIES		REFERENCE: NAME, TITLE & PHONE #	
YOUR DUTIES		TOTAL TIME EMPLOYED if part-time number of hours/month	<input type="checkbox"/> Full Time <input type="checkbox"/> Part time
		FROM (MO/ & YR.)	TO (MO/ & YR.)
		Salary: Beginning	Ending:
		EMPLOYER	
YOUR TITLE		LOCATION (CITY AND STATE)	
YOUR DUTIES		REFERENCE: NAME, TITLE & PHONE #	
YOUR DUTIES		TOTAL TIME EMPLOYED if part-time number of hours/month	<input type="checkbox"/> Full Time <input type="checkbox"/> Part time
		FROM (MO/ & YR.)	TO (MO/ & YR.)
		Salary: Beginning	Ending:

IF NECESSARY, ATTACH ADDITIONAL SHEETS USING THE EMPLOYMENT FORMAT TO PROVIDE EMPLOYMENT DATA DESCRIBING QUALIFYING EXPERIENCE:

YES NO IF NO, PLEASE EXPLAIN:

CERTIFICATION STATEMENT

I certify that all answers to questions in this application are true, and I agree that my misstatements or omissions of material fact will cause forfeiture on my part of all rights to any employment in the County.

Date _____ SIGNATURE _____

Are you now or have you ever been employed by Pierce County? _____ If yes, give job title _____

Department _____ Date of Employment _____

If the position for which you are applying is within an agency which requires **PIERCE** County residency, would you comply?
 YES NO

Pierce County has adopted an Affirmative Action Plan. In order to judge the effectiveness of our recruitment efforts, we request that you provide the following information. This information will in no way be used in the decision of hire, promotion, or transfer. Failure to complete the following will not disqualify you from consideration.

POSITION APPLIED FOR _____ DEPARTMENT _____

Sex Male
Sex Female

How do you describe yourself in the following terms? Please check one.
 White Caucasian
 American Indian/Native American
 Black/Afro-American/Negro
 Latin American/Chicano-Puerto Rican
 Mexican American/Spanish Surname
 Oriental/Asian American
 Other

Veteran Status
 Non-Veteran
 Veteran

Age _____

Dates of Service
_____ to _____

Type of Discharge _____