



PURDUE UNIVERSITY COOPERATIVE EXTENSION SERVICE
Wabash County

DATE _____

Position applying for: _____

Have you read the job description for the position for which you are applying? Yes No

Can you perform all of the essential job duties required of this position? Yes No

Please state what accommodation if any you believe will be required by the County for you to perform all of the essential job duties required of this position. _____

Referred by Advertisement Friend Relative Walk-In Other

Name _____

Local Address _____

Legal or Permanent Address if other than above

Home Phone _____ Business Phone _____

Are you at least 18 years of age? Yes No Social Security No. _____

Are you a resident of the County? Yes No

Have you ever been employed by Wabash County? Yes No If yes, list below:

From _____ to _____ Position held _____ Department _____

Reason for leaving _____

Does the County employ any of your relatives? Yes No If yes, complete the section below:

Name Department Relationship

On what day would you be available to begin work? _____

If travel is included as an essential job duty for this position, would you be available to travel? Yes No

Educational Record

Do you have a high school diploma or GED? _____ Name of School: _____

Are you currently attending or do you have a degree from a post-secondary institution? _____

Name of Institution _____

Area of study _____

Participation and Leadership in Organizations

List experience in any Youth Organizations such as 4-H, Scouts, YMCA, YWCA, etc.

Name of Organization _____

As a member _____ How many years _____ Where _____

As a volunteer _____ How many years _____ Where _____

Name of Organization _____

As a member _____ How many years _____ Where _____

As a volunteer _____ How many years _____ Where _____

Name of Organization _____

As a member _____ How many years _____ Where _____

As a volunteer _____ How many years _____ Where _____

Scholastic honors received (high school or college) _____

Professional and/or social fraternities, sororities, societies, clubs, or organizations of which you are a member:

For the above, indicate the offices or positions of leadership you held or are currently holding:

Civic and community service activities in which you have been associated _____

Employment History

Please read carefully – Beginning with current employment, list all previous positions, including part-time work in college. Use attachment if necessary.

Current employer _____

Name and title of immediate supervisor _____

Address _____

E-mail address _____ Telephone _____

Position Title _____ Held from _____ to _____

Type of work _____ Salary (per year) _____ to _____

Reason for leaving _____

Previous employer _____

Name and title of immediate supervisor _____

Address _____

E-mail address _____ Telephone _____

Position Title _____ Held from _____ to _____

Type of work _____ Salary (per year) _____ to _____

Reason for leaving _____

Previous employer _____

Name and title of immediate supervisor _____

Address _____

E-mail address _____ Telephone _____

Position Title _____ Held from _____ to _____

Type of work _____ Salary (per year) _____ to _____

Reason for leaving _____

References

(Name)	(Address)
(Business & Position)	(Telephone)
(Name)	(Address)
(Business & Position)	(Telephone)
(Name)	(Address)
(Business & Position)	(Telephone)

Have you ever been convicted of or plead guilty to a crime? (Include court-martial convictions, exclude minor traffic violations.)

Yes No

If yes, please complete the following:

Conviction (e.g. felony, misdemeanor)	Offense (e.g. theft)	Date	Location (City State)	Court Action / Sentence

Read this application and your answers carefully before signing below.

Certificate of Applicant: I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief, and I understand and agree that any misstatements or omissions of material fact herein subjects me to disqualification or dismissal. I further understand that my classification as a permanent employee depends upon successfully performing work assigned me during a probationary period, where applicable.

I authorize a release of any records pertaining to my education, employment, and/or personal references to Wabash County and /or the Wabash County Extension Office.

Signature of Applicant _____ Date _____

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with Wabash County will be based on your merit and fitness and on no other consideration. Wabash County does not discriminate in regard to race, color, national origin, age, religion, sex, handicap, marital status, arrest record or conviction record and is an Equal Opportunity / Affirmative Action Employer.