



MONROE COUNTY CONTROL CENTER

Employment Application

PLEASE COMPLETE THE APPLICATION IN FULL

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Position Applied For _____ Date Available _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever worked for this Agency? YES NO If yes, when? _____

Have you ever been charged with or convicted of any criminal offense other than a summary violation? YES NO

If yes, explain: _____

Do you have typing skills? _____ If yes, approximately how many words per minute: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Course: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Course: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Course: _____

References

Please list three professional references (individuals cannot be related to you).

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Previous Employment

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job Title: _____ Starting Salary:\$ _____ Ending Salary:\$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

List any information you feel is important to the position you are applying for:

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

I swear and affirm that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my immediate discharge.

Signature: _____ Date: _____

AN EQUAL OPPORTUNITY EMPLOYER



APPLICANT REFERENCE RELEASE FORM

I, _____ having applied for a position at the Monroe County Control Center, give my approval for any current or former employer, persons, firms, corporations, schools, credit agencies, government agencies, and the like to release any reference material from my records to the Monroe County Control Center.

I will not hold any current or former employer, or any persons or organizations which supply responsive information liable for any information they release to the Monroe County Control Center.

I understand that signing this release is not a condition for employment at the Monroe County Control Center.

Signature

Date



CORRESPONDENCE FORM

The Monroe County Control Center utilizes electronic mail (e-mail) for routine correspondence.

My e-mail address is: _____

PLEASE PRINT LEGIBLY

All correspondence from Monroe County Control Center will come via email. Please check your spam. Correspondence will come from dpesotini@monroeco911.com.

Signature

Date