**MERCER COUNTY 9-1-1**

**911 Shelter Road**

**Princeton, WV 24739**

**304-425-4911**

(PLEASE PRINT)

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

We consider applicants for all positions without regard to race, color, religion, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

 Click or tap here to enter text. Click or tap here to enter text.

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**Position(s) Applied For: Date of Application:**

 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.

**Last Name: First Name: Middle Name:**

 Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text.

**Address: City: State: Zip Code**

Click or tap here to enter text. Click or tap here to enter text.

**Telephone Number(s): Social Security Number:**

If you are under 18 years of age, can you provide required proof of your eligibility to work? [ ]  Yes [ ]  No

Have you ever filed an application with us before? [ ]  Yes [ ]  No

If yes, give date: Click or tap here to enter text.

Have you ever been employed with us before? [ ]  Yes [ ]  No

If yes, give date: Click or tap here to enter text.

Are you currently employed? [ ]  Yes [ ]  No

May we contact your present employer? [ ]  Yes [ ]  No

Are you prevented from lawfully becoming employed in this county because of Visa or Immigration Status? [ ] Yes [ ]  No

**(Proof of citizenship or immigration status will be required upon employment.)**

Have you ever had any job-related training in the United States Military? [ ]  Yes [ ]  No

If yes, please describe: Click or tap here to enter text.

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

 [ ]  Yes [ ]  No

On what date would you be available for work? Click or tap here to enter text.

Are you available to work: [ ] Full Time [ ]  Part Time [ ]  Shift Work [ ]  Temporary

Are you currently on “lay-off” status and subject to recall? [ ]  Yes [ ]  No

Can you travel if a job requires it? [ ]  Yes [ ]  No

Have you been convicted of a felony? [ ]  Yes [ ]  No

If yes, please explain. Click or tap here to enter text.

**Indicate any foreign language you can speak, read and/or write.**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Fluent**  | **Good**  | **Fair**  |
| **SPEAK**  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text.  |
| **READ**  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text.  |
| **WRITE**  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text.  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **GRAMMER SCHOOL**  |  **HIGH SCHOOL**  | **COLLEGE/UNIVERSITY**  | **PROFESSIONAL** **OR TECHNICAL**  |
| School Name & Location  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text.  |
| Years Completed  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |
| Diploma/Degree  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |
| Describe course of study  |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |  Click or tap here to enter text. |

|  |  |
| --- | --- |
| Describe any specialized training, apprenticeship skills & extra-curricular activities  |  Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. |
| Describe any honors you have received  |  Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. |
| State any additional information you feel may be helpful to us in considering your application  |  Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. Click or tap here to enter text. |

List professional, trade, business or civic activities and office held.

(You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry or handicap or other protected status)

 Click or tap here to enter text.

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Click or tap here to enter text.\_

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**References:**

Give name, address and telephone number of three references who are not related to you and are not previous employers:

1.Click or tap here to enter text.\_

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2.Click or tap here to enter text.\_

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3.Click or tap here to enter text.

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Special Skills and Qualifications:

(Summarize special job-related skills and qualifications acquired from employment or other experience.)

 Click or tap here to enter text.

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**Employment Experience:**

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap or other protected status.

EMPLOYER Click or tap here to enter text.

DATES EMPLOYED-FROM:Click or tap here to enter text. TO:Click or tap here to enter text.

ADDRESS:Click or tap here to enter text. WORK PERFORMED:Click or tap here to enter text.

TELEPHONE NUMBER:Click or tap here to enter text. SUPERVISOR:Click or tap here to enter text.

JOB TITLE:Click or tap here to enter text. REASON FOR LEAVING:Click or tap here to enter text.

EMPLOYER Click or tap here to enter text.

DATES EMPLOYED-FROM:Click or tap here to enter text. TO:Click or tap here to enter text.

ADDRESS:Click or tap here to enter text. WORK PERFORMED:Click or tap here to enter text.

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JOB TITLE:Click or tap here to enter text. REASON FOR LEAVING:Click or tap here to enter text.

EMPLOYER Click or tap here to enter text.

DATES EMPLOYED-FROM:Click or tap here to enter text. TO:Click or tap here to enter text.

ADDRESS:Click or tap here to enter text. WORK PERFORMED:Click or tap here to enter text.

TELEPHONE NUMBER:Click or tap here to enter text. SUPERVISOR:Click or tap here to enter text.

JOB TITLE:Click or tap here to enter text. REASON FOR LEAVING:Click or tap here to enter text.

**APPLICANT’S STATEMENT:**

**I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.**

Click or tap here to enter text. Click or tap here to enter text.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SIGNATURE OF APPLICANT DATE**

**MERCER COUNTY COMMUNICATIONS CENTER (9-1-1)**

**AFFIDAVIT OF AGREEMENT**

**REFERENCE: BACKGROUND INVESTIGATION**

**I,** Click or tap here to enter text. **, have been advised that I am a candidate for potential employment with Mercer County 9-1-1 system, Princeton, West Virginia. I hereby grant the staff of 9-1-1 the right to inquire into my background, including, but not limited to, criminal history, credit history, education, past employment and any other area of inquiry as deemed necessary by the 9-1-1 administration.**

**With the voluntary execution of this affidavit, I hereby waive any rights of privacy to persons, firms and or institutions which are relative to the criteria herein contained. Further, I waive any rights and release said entities of any responsibility concerning my personal history, and authorizes and directs the release of any and all documents as requested by Mercer County 9-1-1 personnel and their agents.**

 **NAME OF APPLICANT:** Click or tap here to enter text.

**DOB:**Click or tap here to enter text.

**SS#:**Click or tap here to enter text.

 **SIGNATURE OF APPLICANT DATE**

Click or tap here to enter text.

**WITNESS DATE**

Click or tap here to enter text.

**ELECTRONIC SIGNATURE ACKNOWLEDGEMENT AND CONSENT FORM**

I, Click or tap here to enter text. ,agree and understand that by signing the Electronic Signature Acknowledgment and Consent Form, that all electronic signatures are the legal equivalent of my manual/handwritten signature and I consent to be legally bound to this agreement. I further agree my signature on this document is as valid as if I signed the document in writing. This is to be used in conjunction with the use of electronic signatures on all forms.

**SIGNATURE OF APPLICANT DATE**

Click or tap here to enter text.