

EMPLOYMENT HISTORY

List names of employers in consecutive order with present or last employer listed first. **All employment for the last 10 years must be listed.** Please account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. Attach extra pages if necessary.

NAME OF EMPLOYER		JOB TITLE	
Address		Dates: From	To
		Pay Rate: Start \$	Final \$
Supervisor	Telephone	Reason for Leaving	
NAME OF EMPLOYER		JOB TITLE	
Address		Dates: From	To
		Pay Rate: Start \$	Final \$
Supervisor	Telephone	Reason for Leaving	
NAME OF EMPLOYER		JOB TITLE	
Address		Dates: From	To
		Pay Rate: Start \$	Final \$
Supervisor	Telephone	Reason for Leaving	
NAME OF EMPLOYER		JOB TITLE	
Address		Dates: From	To
		Pay Rate: Start \$	Final \$
Supervisor	Telephone	Reason for Leaving	

Please compose a statement outlining why you want the particular position for which you are applying with the Campbell County Sheriff's Office. This statement must be legible and attached on a separate sheet to this application.

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date. I understand that the employer may request an investigative consumer report from a consumer reporting agency. This report may include information as to my character, reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, schools and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency so that I may obtain a complete disclosure of the nature and scope of the investigation. I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I UNDERSTAND THAT THIS APPLICATION OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE A CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT CAUSE AND WITH OR WITHOUT NOTICE.

I agree that I will not divulge to anyone, other than as I may be directed by the Campbell County Sheriff's Office, any information acquired by me during my employment except as may be required by law. I have read, understand, and by my signature consent to these statements.

Today's Date
Applicant's Signature

NOTE: This application for employment will remain active for a limited time. Only information necessary to complete the application should be attached. This application form and its attachments are official property of the Campbell County Sheriff's Office and cannot be returned, reused or copied after being processed.