

**HARLAN COUNTY ROAD DEPARTMENT**  
**11407 711 Rd Alma, NE 68920**  
**308-928-9800**

**APPLICATION FOR EMPLOYMENT**

**PERSONAL INFORMATION**

Date \_\_\_\_\_ S.S.Number \_\_\_\_\_

Name \_\_\_\_\_  
Last First M.I. Maiden

Present Address \_\_\_\_\_  
Street City State Zip

Permanent Address \_\_\_\_\_  
Street City State Zip

Referred By \_\_\_\_\_

Are you 18 years of age or older? Yes \_\_\_\_\_ No \_\_\_\_\_ Phone Number \_\_\_\_\_

Do you hold a valid Nebraska driver's license? Yes \_\_\_\_\_ No \_\_\_\_\_

**EMPLOYMENT DESIRED**

Position \_\_\_\_\_

Date you can start \_\_\_\_\_ Salary or Wage Desired \_\_\_\_\_

Are you employed now? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, present employer \_\_\_\_\_

May we contact your employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Ever applied to Harlan County before? Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, When? \_\_\_\_\_ Where? \_\_\_\_\_

**EDUCATION**

Name & Location	Did you graduate?	Degree Received
-----------------	-------------------	-----------------

Grammar School \_\_\_\_\_

High School \_\_\_\_\_

College \_\_\_\_\_

Trade, Business, or Correspondence School \_\_\_\_\_

**GENERAL**

Job Related Skills (typing, License's, etc.) \_\_\_\_\_

Activities \_\_\_\_\_

**FORMER EMPLOYERS**

Date Month & Year	Name and Address of Employer	Phone Number	Wage or Salary	Position	Reason For Leaving
Most Current 1st					
From _____ To _____	_____	_____	_____	_____	_____
From _____ To _____	_____	_____	_____	_____	_____
From _____ To _____	_____	_____	_____	_____	_____
From _____ To _____	_____	_____	_____	_____	_____

**REFERENCES** (List three persons not related)

Name	Address	Contact Number	Years Acquainted
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____

## AUTHORIZATION

I authorize investigation on all statements contained in this application. I understand that misrepresentation of information requested is cause for dismissal. Further, I understand and agree that my employment is for no definite period and may regardless of the date of payment of my wages and salary, be terminated at any time without cause and without any previous notice.

Date \_\_\_\_\_

Signature \_\_\_\_\_

In Case of Emergency – Notify \_\_\_\_\_  
Name

Address \_\_\_\_\_  
Phone

### **OFFICE USE ONLY**

REMARKS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_