ARCHER COUNTY APPLICATION FOR EMPLOYMENT

Personal Information

Name		Date			
Social Security Number		Driver's License	State _	Class	
Home Address		A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
Home Phone	Business Phone		May we contact you at work?		
	Position	Applying For			
Full-Time	Part-Time	Temporary	Summer Or	າly	
Referred By		Date Available			
Have you ever been employ	ed by Archer County?	If yes, when?			
	Ed	lucation			
High School	A-4-1		Graduation Date	<u> </u>	
College			Graduation Date		
Degree, Major					
Business/Technical School					
Special Skills					
	Re	ferences			
Name	Address & Phone #	Business	Years Acquair	nted	
	·	**************************************			
		- Andrews			
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AN EQUAL OPPORTUNITY EMPLOYER

- Work History Must be completed in order for your application to be accepted and considered.

 1. The Work History Must be completed in order for your application to be accepted and considered.

 2. Please list most recent job first, including relevant volunteer experience.

 3. Additional information, including resumes, may be attached to support but not replace, the fully completed application.

 4. Coming of all required licenses, cartifications and other documentation must be attached to the application upon submission.

5. No additional info6. If hired, you must	rmation will b provide doci	e accepted for consideration afte uments verifying your identity and	er the closing date. I authorization to work in the	e U.S. within 3 days from the date of hire,	
From (mo/yr)	То	Job Title	·		
Type of Business		Hrs/Week	Starting Salary	Final Salary	
No. of Employees Su	pervised	Employer's Name			
, ,	ndirectly	Complete Address	•	Phone #	
Supervisor's Name				Supervisor's Title	
Description of Duties				1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
		1,000	3000		
From (mo/yr)	То	Job Title			
		•		First Coloni	
Type of Business		Hrs/Week	Starting Salary	Final Salary	
No. of Employees Su	pervised	Employer's Name		Diverse #	
Directly In	directly	Complete Address		Phone #	
Supervisor's Name	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	Supervisor's Title			
Description of Duties					
		•	<u></u>		
From (mo/yr)	То	Job Title			
Type of Business		Hrs/Week	Starting Salary	Final Salary	
N - (5 -)		Employer's Name			
No. of Employees Sup		Complete Address		Phone #	
	directly		•		
Supervisor's Name	Supervisor's Title				
Description of Duties					
Do you object to having any of the above employers contacted? yes no If yes, explain below: Former names under which your references and/or former employers would know you:					
			•		
have information conc from all liability and da	erning me to mage for fur	and complete to the best of my k	ity of Archer officials and ag rstand that failure to answei	on her request that former employers and any persons who gree to hold such persons harmless and release them r all questions fully and truthfully may result in	
	ature Date				