



# *Application for Employment*

## *King William County, Virginia*

*King William County does not discriminate on the basis of race, sex, religion, national origin, handicapped status or veteran status in its employment practices.*

Position Applied For\*: \_\_\_\_\_ Date: \_\_\_\_\_

Type of Employment Preferred: (Check one in both a. and b.)

a. Full Time \_\_\_\_\_ Part Time \_\_\_\_\_

Full OR Part Time \_\_\_\_\_

b. Permanent \_\_\_\_\_ Temporary \_\_\_\_\_

Permanent OR Temporary \_\_\_\_\_

If accepted for employment, when can you begin work? \_\_\_\_\_

What is the minimum salary/wage you will accept? \_\_\_\_\_

### PERSONAL INFORMATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ (home) \_\_\_\_\_ (business)

If the position for which you are applying requires a driver's license:

a. Do you possess a valid driver's license? \_\_\_\_ yes \_\_\_\_ no

b. If yes, in what state was the license issued? \_\_\_\_\_

Do you have any physical or mental limitations which might interfere with your ability to perform the duties of the position for which you are applying? \_\_\_\_ yes \_\_\_\_ no

If yes, describe any measures which could be taken or any aids which could be provided by King William County, which in your opinion, would enable you to satisfactorily perform the duties of the position. \_\_\_\_\_

Have you ever been convicted of a felony as an adult? \_\_\_\_ yes \_\_\_\_ no

If yes, please explain: \_\_\_\_\_

(Note: Conviction will not necessarily exclude you from employment. Such factors as age at time of offence, rehabilitation efforts, recency and seriousness of the crime, immediate past employment record and relationship between offence and job requirements will be considered.)

\* Please indicate specifically which position or positions you are applying for.

EDUCATIONAL BACKGROUND

Circle highest grade completed:

1 2 3 4 5 6 7 8 9 10 11 12

Diploma: \_\_\_\_ yes \_\_\_\_ no

If no diploma, did you complete GED: \_\_\_\_ yes \_\_\_\_ no

Date: \_\_\_\_\_ State: \_\_\_\_\_

Schools attended other than high school:

Name	Location	Courses or major	Dates Attended	Degree

EMPLOYMENT HISTORY

The acceptance or rejection of candidates is determined to a great degree by information provided here. Incomplete data may reduce a candidate's possibility of employment. Please account for all time during the last five years.

Present or last employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of employment (from/to): \_\_\_\_\_

Position Title: \_\_\_\_\_ Number of persons supervised: \_\_\_\_\_

Name & title of immediate supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ Final salary: \_\_\_\_\_

Brief description of duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Next previous employer: \_\_\_\_\_

Address: \_\_\_\_\_

Dates of employment (from/to): \_\_\_\_\_

Position Title: \_\_\_\_\_ Number of persons supervised: \_\_\_\_\_

Name & title of immediate supervisor: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_ Final salary: \_\_\_\_\_

Brief description of duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Next previous employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Dates of employment (from/to): \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Number of persons supervised: \_\_\_\_\_  
 Name & title of immediate supervisor: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ Final salary: \_\_\_\_\_  
 Brief description of duties: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Next previous employer: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Dates of employment (from/to): \_\_\_\_\_  
 Position Title: \_\_\_\_\_ Number of persons supervised: \_\_\_\_\_  
 Name & title of immediate supervisor: \_\_\_\_\_  
 Reason for leaving: \_\_\_\_\_ Final salary: \_\_\_\_\_  
 Brief description of duties: \_\_\_\_\_

May we contact your present employer? \_\_\_\_\_ yes \_\_\_\_\_ no

**REFERENCES**

Please give all information requested below for three persons other than former employers, relatives, county employees or officials who are familiar with your qualifications for employment.

Name	Address	Occupation	Telephone number

Use the space below to provide any additional information which you feel may clarify your qualifications for this position. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

I hereby certify that the foregoing information given by me is true and complete to the best of my knowledge. I understand that any willful misstatements or material omissions on this application will be considered sufficient cause to disqualify me for employment, either prior to or after hiring. I authorize the verification of the information presented in this application and the performance background investigation by the King William County Sheriff's Department in connection with this application if deemed necessary or advisable by the County Administrator. This investigation may include information from the Department of Motor Vehicles, Federal Bureau of Investigation, Central Criminal Records Exchange, United States Military Services and other police agencies. I further authorize any persons, firms or governmental agencies to furnish any pertinent information in their possession to King William County without liability.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

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FOR COUNTY USE ONLY

Invited to interview: \_\_\_\_\_ yes \_\_\_\_\_ no

If no, reasons: \_\_\_\_\_

Date interviewed: \_\_\_\_\_

Name(s) of interviewer(s): \_\_\_\_\_

Candidate's strengths: \_\_\_\_\_

Candidate's weaknesses: \_\_\_\_\_

Employment offer made: \_\_\_\_\_ yes \_\_\_\_\_ no

Comments: \_\_\_\_\_

PLEASE RETURN APPLICATION FORM TO:

County Administrator's Office

King William County

P.O. Box 215

King William, VA 23086

If you have any questions, please call the County Administrator's office at 804-769-4927.