



**Work Experience - List your last three employers *or* last three positions, starting with the most recent. Attach a *Supplement to Employment Application* or other pages if you want to include more positions.**

Month & Year	Name/Address of Employer	Reason for Leaving	<input type="checkbox"/> Paid Employment <input type="checkbox"/> Unpaid Experience
From _____			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
To _____			<input type="checkbox"/> Number of hours per week _____ Ending Pay \$ _____ per _____

Title \_\_\_\_\_ Duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List Computer Skills used in this Position \_\_\_\_\_

Largest Number of People Supervised \_\_\_\_\_ May we contact this Employer? Yes      NO

Supervisor's Name \_\_\_\_\_ Supervisor's Phone Number \_\_\_\_\_

Month & Year	Name/Address of Employer	Reason for Leaving	<input type="checkbox"/> Paid Employment <input type="checkbox"/> Unpaid Experience
From _____			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
To _____			<input type="checkbox"/> Number of hours per week _____ Ending Pay \$ _____ per _____

Title \_\_\_\_\_ Duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List Computer Skills used in this Position \_\_\_\_\_

Largest Number of People Supervised \_\_\_\_\_ May we contact this Employer? Yes      No

Supervisor's Name \_\_\_\_\_ Supervisor's Phone Number \_\_\_\_\_

Month & Year	Name/Address of Employer	Reason for Leaving	<input type="checkbox"/> Paid Employment <input type="checkbox"/> Unpaid Experience
From _____			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time
To _____			<input type="checkbox"/> Number of hours per week _____ Ending Pay \$ _____ per _____

Title \_\_\_\_\_ Duties \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

List Computer Skills used in this Position \_\_\_\_\_

Largest Number of People Supervised \_\_\_\_\_ May we contact this Employer? Yes      No

Supervisor's Name \_\_\_\_\_ Supervisor's Phone Number \_\_\_\_\_

**Other Employment:** (Account for all employment in at least the last 10 years)

Name and Address of Company	Position Held	Employment Dates

**Other Related Experiences:** Please describe here any other additional experiences or professional certifications, honors, knowledge or technical or special skills not mentioned elsewhere, (i.e., equipment or machines operated, etc).  
 \_\_\_\_\_  
 \_\_\_\_\_

Computer Skills (name software and hardware) \_\_\_\_\_  
 \_\_\_\_\_  
 Supplemental Work Experience \_\_\_\_\_  
 \_\_\_\_\_

**References:** Include supervisors and managers that **we may contact** to verify your work performance and qualifications.

Name _____	Occupation _____ Organization _____	Email Address _____ Phone _____
Previous Supervisor?    ___ Yes ___ No		
Name _____	Occupation _____ Organization _____	Email Address _____ Phone _____
Previous Supervisor?    ___ Yes ___ No		
Name _____	Occupation _____ Organization _____	Email Address _____ Phone _____
Previous Supervisor?    ___ Yes ___ No		

**Affirmation**

I affirm that the facts set forth above in my application for employment are true, correct and complete to the best of my knowledge. I understand that I may be required to submit information not requested on this application form; that the employing agency may verify any information provided by me in the employment process; and that incomplete information or omission of my signature is just cause for rejection of my application.

I understand that the Hiring Manager and Human Resources will send correspondence, to the e-mail address I provided (if applicable), regarding specific information about this application and I understand it is my responsibility to check my e-mail regularly during the recruitment process.

I understand and agree that, if hired, my employment would be contingent upon conditions specific to the position for which I am applying. I also understand that any omission of information, or erroneous information provided in any part of the employment process, would be sufficient cause for discharge.

I understand and agree that any employment which I may have with Osage County shall be "at will" which means that either Osage County or I can terminate the employer/employee relationship at any time, with or without cause, with or without prior notice.

I understand and agree there is not, and will not be a contract of employment with Osage County, except by written contract, approved by the Board of County Commissioners.

I do hereby consent that any person, agency, present employer, or former employer may release and disclose any record, information, or opinion concerning me or any present or former employment. I do further release and discharge any person, entity, or agency which provides any record, information, or opinion concerning me or my present employment, including but not limited to FBA, KBI, NCIC, III, present employer, or former employer, from any and all claims, actions, causes of action, and judgments for such disclosure or opinion.

\_\_\_\_\_  
**Signature of Applicant:** I agree and understand that all electronic signatures are the legal equivalent of my manual/handwritten signature and I consent to be legally bound to this document.

\_\_\_\_\_  
**Date**