

Muhlenberg County Government
Pre Employment Questionnaire (an equal opportunity employer)

Section I- Personal Information

Date Applied _____

Name _____ Social Sec. No. _____

Present Address _____

Permanent Address _____

Phone Number _____ Are you 18 years of age or older? Yes ___ No ___

Are you prevented from lawfully becoming employed in this country because of visa or immigration status? Yes ___ No ___

Section II- Employment Desired

Position Applied for _____ Date you can start _____ Salary Desired _____

Are you employed now? _____ If so, may we inquire of your present employer? _____

Ever applied here before? _____ If so, when? _____

Referred by _____

Section III- Education

	Name & Location of School	Years	Did you graduate?	Special Studies?
Elementary				
High School				
College				
Trade/Other				

Section IV- General

Subjects of Special Study or Research Work _____

Special Skills _____

Activities: civic/athletic/etc _____

Exclude organizations, the name of which indicates race, creed, sex, age, marital status, color, or nation of origin of its members.

US Military or Naval Service _____ Rank _____ Present Membership in National Guard or Services _____

This form has been revised to comply with the provisions of the Americans with Disabilities Act and the final regulations and Interpretive guidance promulgated by the EEOC on July 28, 1991.

Section IV- Previous Employment

Date/Month/Year	Name and Address of Employer	Salary	Position	Reason for Leaving
From To				
From To				
From To				
From To				

Which of these jobs did you like best? _____
 What did you like most about this job? _____

Section VI- References

Give the names of three persons, not related to you, whom you have known at least one year.

Name	Address	Business/Association

Section VII- Completion

In case of emergency contact _____
Name Address Phone

I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at anytime. In consideration of my employment, I agree to conform to the County's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at anytime, at either my or the County's option. I understand and agree that the county that the county may change the terms and conditions of my employment, with or without cause, and with or without notice, at anytime. I understand that no County representative, other than it's Fiscal Court, and then only when in writing and approved by Fiscal Court open session, has any authority to enter into any agreement for employment for specific period of time, or to make agreement contrary to the foregoing.

Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE---FOR EMPLOYER ONLY

Interviewed by _____ Date _____
 Remarks _____

Neatness _____
 Hired: Yes _____ No _____ Position _____ Department _____
 Salary/Wage _____ Date to report _____
 Approved 1. _____ 2. _____ 3. _____
Supervisor Judge-Executive Other Needed