

County of Bedford, Virginia

Department of Human Resources • 122 East Main Street • Bedford, VA 24523 <u>www.bedfordcountyva.gov</u> • (540) 587-0770 • Fax (540) 587-0710

Submit your completed application to hrinfo@bedfordcountyva.gov

APPLICATION FOR EMPLOYMENT

The County of Bedford, Virginia is an equal opportunity employer and all applicants and employees shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, age, sex, national origin, physical or mental disability, genetics, protected veteran status, sexual orientation, gender identity or expression, marital status, pregnancy, childbirth or related medical conditions (including lactation, or any other basis protected by Federal or State law. If needed, please contact the Human Resources office for a reasonable accommodation in completing this application.

Bedford County accepts applications only for current advertised positions. Resumes' are welcome as an accompaniment to this application but are not considered a substitute for the information requested on the application. An application remains active during the recruitment period for which it was submitted. A separate application must be submitted for each position in which the applicant wishes to express interest.

Date:	Position applied for:							
PERSONAL	DATA							
Legal Name								
Last				First			Other Names Used	
Address								
	Street Address or PO Box			City	City		Zip Code	
	E-Mail Address					-		
Phone	Area Code Telephone Number				Area Code		Telephone Number (alternate)	
Certain posi	itions have an a	ge requirement.	Are you	Are you 21 years of age or older?			No	
			If NO, ar	e you 18 year	s of age or older?	Yes	No	
EDUCATION	V							
Please provid	le all education or	specialized trainin n educational requ			hich you are applying. ed job description.			
Did you grad	duate from high	school or comp	lete a high sc	hool equivale	ncy program? Ye	s No		
Name of High School				Location				
Name of College / University or other Post High School Institution		-	Location	Degree Received	Major or Specialty	Minor	Dates Attended	
1.								
2.								
3.								
Other educa	ation, training, c	ertification, etc.	relevant to t	he position ye	ou are applying for:			

EMPLOYMENT AND VOLUNTEER EXPERIENCE Starting with the most recent, describe ALL paid, military, and applicable volunteer job experience. Highlight knowledge, skills, and abilities which best demonstrate your qualifications for this position. Please list significantly different jobs within the same organization as separate items. Use supplemental sheets if additional space is needed. Job Title **Employer** Type of Business **Street Address** Dates of Service: From: To: City State Zip Supervisor's Name **Supervisor's Position** Salary: **Full Time** Part Time – Hours per week: Starting S Ending S Job Duties / Equipment Used Did you supervise others? Yes – How Many? No May we contact this employer? Yes Reason for leaving? No Job Title **Employer** Type of Business **Street Address** Dates of Service From: City Zip Supervisor's Name **Supervisor's Position** Salary: **Full Time** Part Time – Hours per week: Starting Ending S Job Duties / Equipment Used Did you supervise others? Yes – How Many? May we contact this employer? Yes No Reason for leaving? Job Title **Employer** Type of Business Street Address Dates of Service From: To: _____ City State Zip Supervisor's Name **Supervisor's Position** Salary: Part Time – Hours per week: **Full Time Starting** S Ending S Job Duties / Equipment Used Did you supervise others? Yes – How Many? No May we contact this employer?

Reason for leaving?

LICENSE INFORMATION List all applicable license information, including driver's license and commercial driver's license, certificate or other authorization to practice a trade or profession: **Expiration Date Granted by (Licensing Board)** Type **License Number** Driver's License CDL Use this space for other education, certifications, training, special achievements, or specialized skills relevant to the position for which you are applying: **MISCELLANEOUS** Expected rate of pay? \$ What date would you be available to begin employment? Which shift(s) will you accept? **Evening Nights** Rotating Weekends Day Would you accept Full-time Part-time If part-time, specify days and hours: Have you ever been employed by Bedford County? Yes No If yes, in what capacity? If yes, dates you were employed with the County: To. From: Do you currently have any relatives employed by Bedford County? No If yes, please give name and relationship: How did you learn about this employment opportunity? Have you ever been convicted for any violation(s) of law, including moving traffic violations? (Do not include convictions which were adjudicated in Juvenile Court) No If YES, please provide description of offense and date of conviction. Under the Immigration Reform and Control Act of 1986, you will be required to verify your identity and certify that you are eligible to be employed. Further, you will be required to provide documentation to that effect should you be employed. For purposes of compliance with the Immigration Reform and Control Act, are you legally eligible for employment in the United States? Yes **REFERENCES** Please list three professional references that are familiar with your qualifications. Do not include relatives. **Contact Information:** Relationship **Phone Number or Email** Name Company 1. 2. 3. **CERTIFICATION AND SIGNATURE OF APPLICANT** I hereby certify that all entries on this application for employment are true and complete. I agree and understand that any falsification or information herein, regardless of time of discovery, may be considered sufficient cause for dismissal. I understand that all information on this application is subject to verification. I understand employment is contingent on a successful background check, drug test, and acceptable driving record (if required by position). I hereby authorize Bedford County to obtain my criminal history and driving records now and at any time during the course of my employment as the County may deem necessary. I also consent to reference, former employers, and/or educational institutions being contacted regarding this application. I authorize Bedford County to rely upon and use, as it sees fit, any information received from such contacts. I understand the County may be required to provide information concerning my application for employment and my employment history to other agencies for use in any employmentrelated investigation or inquiry.

Date:

Signature: