



Delaware County
 Human Resources Office
 100 West Main Street, Room 208
 Muncie, IN 47305
 Tel: 765.741.3397
An Equal Opportunity Employer

Employment Application

Instructions: Please type or print legibly. All areas must be completed for consideration. Attach additional pages as needed. Return completed form to the Human Resources Department. Applications are kept on file in Human Resources for forty-five (45) days.

Applicant Information													
Full Name:					Date:								
Last			First			M.I.							
Address:													
Street Address						Apartment/Unit #							
City						State		ZIP Code					
Phone: ()			E-mail Address:										
Date Available:			Desired Salary: \$										
Position Desired:					Date Available:								
Are you related to any current Delaware County employee? If yes, state name and relation.													
Are you a citizen of the United States?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/>		NO <input type="checkbox"/>	
Have you ever worked for Delaware County?				YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, where and when?					
Have you ever been convicted of a crime other than a minor traffic violation? <i>If yes, provide explanation below.</i>				YES <input type="checkbox"/>		NO <input type="checkbox"/>		In what type of position are you interested? FT <input type="checkbox"/> PT <input type="checkbox"/>					
Education													
High School:					City/State:								
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:			
University:					City/State:								
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:			
Other:					City/State:								
From:		To:		Did you graduate?		YES <input type="checkbox"/>		NO <input type="checkbox"/>		Degree:			
References													
Please list three (3) individuals we may contact who know your background and qualifications. <i>Do not list relatives as references.</i>													
Full Name:					Relationship:								
Company:					Phone: ()								
Email:													
Full Name:					Relationship:								
Company:					Phone: ()								
Email:													

Full Name:		Relationship:	
Company:		Phone:	()
Email:			

Employment History

Employer:		Phone:	()
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
From:		To:	
Reason for Leaving:			
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Employer:		Phone:	()
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
From:		To:	
Reason for Leaving:			
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

Company:		Phone:	()
Address:		Supervisor:	
Job Title:		Starting Salary: \$	Ending Salary: \$
From:		To:	
Reason for Leaving:			
May we contact your previous supervisor for a reference?		YES <input type="checkbox"/>	NO <input type="checkbox"/>

List and explain any periods of unemployment within the past five years.

From:		To:		Reason:	
From:		To:		Reason:	
From:		To:		Reason:	

Additional Information

Are you 18 years of age or older?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If this position requires a valid driver's license, do you currently have one?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Are you willing to submit to a physical exam if required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

We are interested in any further information about you that may distinguish your application. This might include travel, honors, publications, advanced study, certifications, extracurricular activities, civic and/or special interests, and athletic participation. Note: Do not include information that would disclose your race, age, ethnic origin, religious beliefs or political persuasion. *(Attach additional pages as necessary.)*

Military Service

Branch:		From:		To:	
Rank at Discharge:		Type of Discharge:			
If other than honorable, explain:					

Certification of Applicant and Authorization of Reference and/or

Delaware County does not discriminate on the basis of race, color, gender, religion, age, national origin, marital status, veteran status, disability, sexual orientation, or other basis prohibited by law.

I understand that my application will be on file in the Human Resources Department for forty-five (45) days, and all materials accompanying this application become the property of Delaware County. If I still desire a position with Delaware County, it is my duty to fill out a new application and file it with the Human Resources Department. Otherwise, Delaware County will not consider me for employment after this application expires.

I certify that there are no misrepresentations or falsifications of these statements and answers. I am aware that should investigations disclose such, my application may be disqualified, my name removed from all eligible lists, and my future applications may not be accepted. I also am aware that falsification of this application, or any accompanying data, may result in my dismissal from any position with Delaware County.

I understand that, if I am hired, I may be hired conditional on passing any medical and/or psychological examinations that the employer deems necessary to determine my ability to perform the essential functions of the position. I agree to submit to alcohol and/or drug screening tests, if requested of me, at any time prior to or during my employment.

I understand that should an employment offer be extended to me and accepted that I will fully adhere to the policies, rules, and regulations of employment of Delaware County. However, I further understand that neither the policies, rules, regulations of employment nor anything said during the interview process shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or Delaware County may terminate my employment at any time with or without notice or cause.

I authorize any person, agency, partnership, or corporation having any information concerning my background, educational records, or employment records to release such information. This information is to be used for possible employment with Delaware County.

Signature:		Date:	
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Pre-Employment Drug Screening

General Statement of Policy

Delaware County will not employ individuals known to use illegal drugs or misuse prescription drugs. All prospective new employees shall be subject to drug and alcohol testing. Offers of employment shall be contingent on passing the pre-employment drug and alcohol screen.

All otherwise qualified applicants for employment will be tested for drug use prior to hiring by Delaware County. This screening must be done within two (2) hours of the time you are instructed to submit a specimen. Applicants will be responsible for any costs and fees associated with requisite drug and alcohol testing. The payment of costs and fees will be due at the time of the testing. Such testing will include the analysis of urine, or any other medically accepted testing procedure.

This application will serve as your consent form and must be signed prior to the time of any such drug testing, authorizing Delaware County to conduct such testing and to rely upon the results, along with other pre-employment tools in extending or denying employment.

Consequences of Refusal to Take Test

Job applicants have the right to refuse to submit to a drug test, but such a refusal will result in the withdrawal of the job offer and disqualification from further hiring consideration.

Consequences of Positive Test Results

Applicants testing positive for the presence of drugs will automatically be disqualified from further hiring consideration for a period of one (1) year.

Data Privacy

Delaware County will not disclose the test result reports or other information acquired in the drug testing process to another employer or to a third party individual, governmental agency or private organization without the written consent of the person tested, unless permitted or required by law or court order. Job applicants are required to submit to a drug screening as a condition of employment.

I, _____, have read and understand Delaware County's Pre-Employment Drug Screening Policy.

 Printed Name

 Date

 Applicant Signature

 Date



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Voluntary Affirmative Action Form (For Applicant Use Only)

PLEASE READ CAREFULLY:

This form is completely voluntary. It is used solely to help us comply with government record keeping, reporting, and other legal requirements. We appreciate your cooperation. It will be kept completely separate from any application and is not a part of the application you submit. Applicants are considered for all positions. You may refuse to provide all or part of the requested data. Any refusal to provide information will NOT adversely affect your eligibility for employment.

No employee or candidate for employment shall, on the basis of race, color, gender, religion, age, national origin, marital status, veteran status, disability, sexual orientation, or other basis prohibited by law, not be discriminated against, excluded from participation in, denied the benefits of, or otherwise be subjected to, discrimination in any term or condition of employment with Delaware County.

Sex (Gender): Female Male

Race/Ethnicity (check one):

- Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.
- White (Not Hispanic or Latino)** – A person having origins in any of the original people of Europe, the Middle East, or North Africa.
- Black or African American (Not Hispanic or Latino)** – A person having origins in any of the black racial groups of Africa.
- Native Hawaiian or Other Pacific Islander (Not Hispanic or Latino)** – A person having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- Asian (Not Hispanic or Latino)** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or Indiana Subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- American Indian or Alaskan Native (Not Hispanic or Latino)** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
- Two or More Races (Not Hispanic or Latino)** – All persons who identify with more than one of the above five races.

Veteran Status: Veteran Non-veteran

Please identify where you learned about an employment opportunity with this organization.

- Newspaper Ad Employee Referral Recruiter
- Website Tech School/College State Employment Service
- Other: _____