

# JOB APPLICATION

Gallatin County Fiscal Court  
200 Washington St., Warsaw, Kentucky 41095  
859-567-5691

Gallatin County Fiscal Court is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

## APPLICANT INFORMATION

APPLICANT NAME:
DATE OF APPLICATION:
ADDRESS:
TELEPHONE NUMBER:
SOCIAL SECURITY NUMBER:
DRIVERS LICENSE #:

## EMPLOYMENT POSITION

*Position(s) applying for:*

HOW DID YOU HEAR ABOUT THIS POSITION?
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DATE YOU CAN START:	SALARY DESIRED:
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## PERSONAL INFORMATION

HAVE YOU EVER APPLIED/WORKED FOR GALLATIN COUNTY FISCAL COURT BEFORE? IF YES, WHEN?	Yes	No
DO YOU HAVE ANY FRIENDS, RELATIVES, OR ACQUAINTANCES WORKING FOR GALLATIN COUNTY FISCAL COURT?	Yes	No
IF YES, STATE NAME & RELATIONSHIP:		
ARE YOU 18 YEARS OF AGE OR OLDER?	Yes	No
ARE YOU A U.S. CITIZEN OR APPROVED TO WORK IN THE UNITED STATES?	Yes	No
WILL YOU CONSENT TO A MANDATORY CONTROLLED SUBSTANCE TEST?	Yes	No
DO YOU HAVE ANY CONDITION WHICH WOULD REQUIRE JOB ACCOMMODATIONS?	Yes	No
IF YES, PLEASE DESCRIBE ACCOMMODATIONS REQUIRED BELOW.		
HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE (FELONY OR MISDEMEANOR)?	Yes	No
IF YES, PLEASE STATE THE NATURE OF THE CRIME(S), WHEN AND WHERE CONVICTED AND DISPOSITION OF THE CASE:		

ARE YOU A MEMBER OF THE ARMED SERVICES?	BRANCH?	HOW MANY YEARS DID YOU SERVE?
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## JOB SKILLS/QUALIFICATIONS

PLEASE LIST BELOW THE SKILLS AND QUALIFICATIONS YOU POSSESS FOR THE POSITION FOR WHICH YOU ARE APPLYING:


**EDUCATION AND TRAINING**

HIGH SCHOOL	LOCATION (CITY, STATE)	YEAR GRADUATED	DEGREE EARNED
COLLEGE/UNIVERSITY	LOCATION (CITY, STATE)	YEAR GRADUATED	DEGREE EARNED
VOCATIONAL SCHOOL/ TRAINING	LOCATION (CITY, STATE)	YEAR GRADUATED	DEGREE EARNED

**PREVIOUS EMPLOYMENT**

EMPLOYER NAME:	JOB TITLE:
EMPLOYER ADDRESS:	SUPERVISOR NAME:
EMPLOYER TELEPHONE:	DATES EMPLOYED:
SALARY:	REASON FOR LEAVING:
EMPLOYER NAME:	JOB TITLE:
EMPLOYER ADDRESS:	SUPERVISOR NAME:
EMPLOYER TELEPHONE:	DATES EMPLOYED:
SALARY:	REASON FOR LEAVING:
EMPLOYER NAME:	JOB TITLE:
EMPLOYER ADDRESS:	SUPERVISOR NAME:
EMPLOYER TELEPHONE:	DATES EMPLOYED:
SALARY:	REASON FOR LEAVING:

**REFERENCES**

REFERENCE	BUSINESS	PHONE	YEARS KNOWN

“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 ANY TIME.

IN CONSIDERATION OF MY EMPLOYMENT, I AGREE TO CONFORM TO THE FISCAL COURT’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 ANY TIME, AT EITHER MY OR THE FISCAL COURT’S OPTION. I ALSO UNDERSTAND AND AGREE THAT THE TERMS AND CONDITIONS OF MY EMPLOYMENT MAY BE CHANGED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME BY THE FISCAL COURT. I UNDERSTAND THAT NO FISCAL COURT REPRESENTATIVE, OTHER THAN THE JUDGE EXECUTIVE, AND THEN ONLY IN WRITING AND SIGNED BY THE JUDGE EXECUTIVE, HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIC PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING”

**APPLICANT  
SIGNATURE:**

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**DATED:**

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