## **DEFIANCE COUNTY ENGINEER / HIGHWAY GARAGE**

510 Court Street, Suite 201, Defiance, OH 43512 engineer@defiancecounty.oh.gov

## **EMPLOYMENT APPLICATION**

## WE ARE AN EQUAL OPPORTUNITY EMPLOYER

The Defiance County Engineer considers all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status for employment.

		(PLEASE PRINT)		
Last Name	First Name	e M.I.		Social Security Number
Street Address		City	State	Zip Code
Home Telephone Nu	mber Cell Numb	per Emai	il	
Position applying	for? [] Highway Maint [	[ ] Heavy Equip [ ] Seasonal	[ ] Other	
Best way & time	to contact you is:			
Are you 18 years	[ ] yes [ ] no			
Have you ever file	[]yes[]no			
•	friends or relatives who wo			[ ] yes [ ] no
Do you hold a va	lid drivers license? Sta	ate & license #		[ ] yes [ ] no
Do you have a C	DL? []yes[]no Cl	ass & Endorsements		
Have you been c	onvicted of a serious traffic	offense?		[]yes[]no
Date you are ava	ilable for work /	<u>/</u>		
EDUCATION		- <u></u>		
School	Name & Address of School	Major Course of Study	Years Completed	Diploma / d Degree
High School				
College				
Other (Specify)				
arriving at an empl given in my applica rules of the Employ for any law enforce motor vehicle oper County Engineer's all other persons h	rs given are true and complete oyment decision. In the even ation or interview(s) may resul yer. As an applicant for employment or governmental agency ation history for the purpose of employers, law enforcement parmless for releasing any and	e. I authorize the investigation of a at of employment, I understand that it in discharge. I also understand the oyment by the Defiance County Ency to investigate my prior employment making employment decision. I personnel, the Defiance office and all information to the Defiance Co	false or mislead hat I am require gineer, I hereby ent history, crimi further agree to its employees a unty Engineer's	ding information d to abide by all give permission nal history and an hold all previous and agents and
Signature of A	Applicant		Date	

	•	_	ations that may indicate	_	jion, gena	er, riadoriai origiri,
disabilities o	other protected st	atus. Attach add	ditional sheets if neede			
			Dates Employed	Job Title(s)	_	Work
Employer			From / To	Starting / Endin	ıg	Performed
Address			Hourly / Salary Rate			
Telephone			Start End	Ή		
Supervisor						
Reason for				+		
Leaving				May we contact?	Yes	[ ] No [ ]
Employer			Dates Employed From / To	Job Title(s) Starting / Endin	na l	Work Performed
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Address			Hourly / Salary Rate	<u> </u>		
Telephone			Start End	<u></u>		
Supervisor				T		
Reason for				contact?		N- F 1
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Address			<del>   </del>	† · · · · · · · · · · · · · · · · · · ·	'8	<del></del>
Addicas			Hourly / Salary Rate	e l		
Telephone			Start End	1		
Supervisor						
Reason for Leaving				May we contact?	Yes	[ ] No [ ]
-	Include expla	nation for any	y gaps in employme	ent.		
ADDITION#	-				- tiono	
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PERSONAL Name					ers or previ	ious supervisors. Occupation
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