OWYHEE COUNTY

APPLICATION FOR EMPLOYMENT | Equal Opportunity Employer

Please complete all applicable sections accurately. Attach a résumé or additional pages if needed. This application is for the position identified below.

Date of application: _____

1 Applicant information

Full legal name: _____

Other names used (if relevant to employment records): _____

Street address: _____

City / State / ZIP: _____

Primary phone: _____

Alternate phone: _____

Email address: _____

Professional website or portfolio (optional): _____

2 Position and availability

Position / job title applying for: _____

Employment type: ☐ Full-time ☐ Part-time ☐ Temporary / Seasonal

Available shifts: ☐ Days ☐ Nights ☐ Other

Earliest available start date: _____

May we contact your current employer? ☐ Yes ☐ No ☐ Not applicable

Are you legally authorized to work in the United States? ☐ Yes ☐ No

Can you travel if the position requires it? ☐ Yes ☐ No

Do you hold a valid driver's license (if required for this position)? ☐ Yes ☐ No ☐ N/A

Issuing state (if applicable): _____

3 Education and training

List education or training relevant to the position. Additional pages may be attached.

School / program	Name and location	Dates attended	Degree / certificate / field

High school			
College / university			
Vocational / other			

EMPLOYMENT HISTORY

List your most recent employment first. Include additional employers on a separate page if needed.

Employer 1

Employer / organization: _____

Address / city / state: _____

Phone / supervisor: _____

Dates employed (from - to): _____

Job title: _____

Final rate of pay (optional): _____

Primary duties and responsibilities:

_____

Reason for leaving: _____

Employer 2

Employer / organization: _____

Address / city / state: _____

Phone / supervisor: _____

Dates employed (from - to): _____

Job title: _____

Final rate of pay (optional): _____

Primary duties and responsibilities:

_____

Reason for leaving: _____

Employer 3

Employer / organization: _____

Address / city / state: _____

Phone / supervisor: _____

Dates employed (from - to): _____

Job title: _____

Final rate of pay (optional): _____

Primary duties and responsibilities:

_____

Reason for leaving: _____

SKILLS, CREDENTIALS & REFERENCES

4 Skills and qualifications

List technology, software, equipment, and other job-related skills:

Word processing / spreadsheets: _____

Databases / other software: _____

Office equipment / digital phone systems: _____

Email, internet, and communication tools: _____

Other relevant skills: _____

Professional licenses / certifications (include expiration dates if applicable): _____

5 Veterans' preference

Are you claiming veterans' preference under applicable Idaho law? ☐ Yes ☐ No

If yes, complete the Veterans' Preference section later in this application and attach supporting documentation as applicable.

6 References

Provide three professional or personal references who are not related to you by blood or marriage.

Reference 1

Name: _____

Phone / email: _____

Address (optional): _____

Relationship / occupation: _____

Reference 2

Name: _____

Phone / email: _____

Address (optional): _____

Relationship / occupation: _____

Reference 3

Name: _____

Phone / email: _____

Address (optional): _____

Relationship / occupation: _____

ADDITIONAL INFORMATION & CERTIFICATION

7 Additional information

Are you related by blood or marriage to a current Owyhee County employee? ☐ Yes ☐ No

If yes, name and relationship: _____

The previous application asks whether an applicant has ever been charged with a crime. That question has been omitted from this updated general application pending HR/legal review of job-related background screening procedures.

8 Applicant certification

I certify that the information I provided in this application is true, accurate, and complete to the best of my knowledge. I understand that materially false or misleading statements may result in disqualification from consideration or, if hired, appropriate employment action.

I understand that this application is not a contract of employment and does not guarantee an offer of employment. Any employment relationship is subject to applicable law and County policies.

Applicant signature: _____

Date: _____

Equal employment opportunity

Owyhee County provides equal employment opportunity in accordance with applicable federal and state law. Reasonable accommodations are available to qualified applicants with disabilities during the application process.

VETERANS' PREFERENCE

Complete this section only if you wish to claim veterans' preference. Eligibility and required documentation are determined under applicable Idaho law. HR should verify current statutory criteria before this form is adopted.

I am claiming veterans' preference: ☐ Yes ☐ No

Select the category that applies, if any:

☐ I have a qualifying service-connected disability.

☐ I am the qualifying spouse of an eligible disabled veteran.

☐ I am the qualifying unremarried widow or widower of an eligible veteran.

☐ I served qualifying active duty and was honorably discharged.

Supporting documentation attached: ☐ Yes ☐ No ☐ Will provide separately

Examples may include DD Form 214 and other documentation relevant to the claimed preference. Submit sensitive records through the County's designated secure process.

I certify that the information provided in this section is accurate to the best of my knowledge.

Printed name: _____

Signature: _____

Date: _____

AUTHORIZATION TO VERIFY EMPLOYMENT INFORMATION

This authorization is intended for use by Owyhee County in evaluating my application for employment. It does not replace any separate notices or authorizations required by law for consumer reports, criminal history checks, or other regulated background screening.

Applicant full name: _____

Position applied for: _____

May the County contact my current employer? ☐ Yes ☐ No ☐ Not applicable

I authorize Owyhee County and its designated representatives to verify the employment, education, professional credentials, and references I have supplied, subject to applicable law. I authorize the organizations and individuals I have identified to provide relevant, lawful information about my qualifications and employment history.

This authorization does not request or authorize disclosure of information protected from inquiry or disclosure by applicable law. Any additional background investigation requiring separate authorization will be handled through a separate process.

Applicant signature: _____

Date: _____

Printed name: _____

For HR use only: _____