

**CLAY COUNTY, MS  
EMPLOYMENT APPLICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_  
(Please Print) Last First Middle

Please fill in the application yourself, in ink, giving complete answers to questions which apply to you.  
Applications will be considered valid for a period of up to 180 days after date of submission. Active files are purged January 2<sup>nd</sup> and July 2<sup>nd</sup> of every year. The application must be renewed by the applicant before these dates in order to be considered for future employment.

Are you a United States citizen? Yes  No  (Proof of citizenship will be required upon employment)

Position applying for \_\_\_\_\_ Soc. Sec. No. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Sex Male  Female

Phone \_\_\_\_\_ Other phone \_\_\_\_\_

Where you can be located? Name phone listed under  
Present address \_\_\_\_\_ How long? \_\_\_\_\_  
No. Street City State Zip

Previous address \_\_\_\_\_ How long? \_\_\_\_\_  
From To

Previous address \_\_\_\_\_ How long? \_\_\_\_\_  
From To

Do you have any relatives working for this county? \_\_\_\_\_ Who? \_\_\_\_\_

Who referred you to us? \_\_\_\_\_

My Wife (Husband) is employed by \_\_\_\_\_  
Name Address Phone

Do you have a valid Mississippi Driver's License? \_\_\_\_\_

Have you ever been convicted of a felony? \_\_\_\_\_

**RECORD OF PREVIOUS EMPLOYMENT**

**PRESENT EMPLOYER**

(or most recent) \_\_\_\_\_ Kind of business \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Starting date \_\_\_\_\_ Starting title \_\_\_\_\_ Starting earnings \_\_\_\_\_

Present date \_\_\_\_\_ Present title \_\_\_\_\_ Present earnings \_\_\_\_\_

Starting duties \_\_\_\_\_

Present duties \_\_\_\_\_

Last immediate supervisor's name and title \_\_\_\_\_

Reason for leaving \_\_\_\_\_

May we contact your present employer now without jeopardizing your position? \_\_\_\_\_

Do we have your permission to check references and criminal conviction records? \_\_\_\_\_

<b>DATES</b>	Company/Address/ Telephone #	
From To		
<b>Salary</b>	Position/Type of Work	Reason for Leaving
<b>DATES</b>	Company/Address/ Telephone #	
From To		
<b>Salary</b>	Position/Type of Work	Reason for Leaving

What special skills & qualifications do you have? \_\_\_\_\_

What machines can you operate? \_\_\_\_\_

**EDUCATIONAL RECORD**

Education	Name & Location of School	Years Attended	Date Graduated	Subjects Studied
Grammar School				
High School				
College				
Trade or Business School				

**REFERENCES**

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

In case of emergency please notify:

Name \_\_\_\_\_ Phone \_\_\_\_\_

ADDRESS

RELATIONSHIP

The Civil Rights Act of 1964 prohibits discrimination in employment practice because of race, color, religion, sex or national origin. The facts set forth above in my application are true and complete. I understand that, if employed, false statements on this application shall be considered sufficient cause for dismissal.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date Signed