

FREMONT COUNTY GOVERNMENT  
APPLICATION FOR EMPLOYMENT  
FREMONT COUNTY MUSEUMS

(Please type or print)

JOB TITLE: \_\_\_\_\_ PART OR FULL TIME: \_\_\_\_\_  
NAME:

\_\_\_\_\_  
Last First Middle DATE: \_\_\_\_\_  
MAILING ADDRESS:

\_\_\_\_\_  
Street City State ZIP  
RESIDENCE (if different from mailing address):

\_\_\_\_\_  
Street City State ZIP

TELEPHONE: Daytime \_\_\_\_\_ Evening \_\_\_\_\_ EMAIL \_\_\_\_\_

18 years of age or older? \_\_\_\_\_ Valid Driver's License? \_\_\_\_\_ DL# \_\_\_\_\_

If hired, can you provide written evidence that you are authorized to work in the U.S.? \_\_\_\_\_

EDUCATION

If post-secondary degree or certificate, include:

- A. full name of institution
- B. mailing address of institution
- C. email address of institution
- D. specific degree(s) or certificate(s) earned
- E. year degree(s) or certificate(s) earned
- F. major for each degree earned and/or description for each certificate earned
- G. legal name at the time you earned your degree or certificate if different from the name on this application

Type	Name/Location	Years completed	Degree/Diploma
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

Attach additional degree/certificate information on another sheet of paper

**EMPLOYMENT RECORD**  
(Start with current/most recent)

Company Name/Address/Phone      Type of Work      Employment Dates      Reason for Leaving

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Attach additional jobs on another sheet of paper

May we contact your current employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Is there any information we would need regarding your name, or use of another name, for us to be able to check your work record? If yes, please specify \_\_\_\_\_

Please list any additional information that relates to your ability to perform the job for which you have applied (such as licenses, memberships, hobbies, etc.): \_\_\_\_\_

\_\_\_\_\_

**WORK-RELATED REFERENCES**

Name	Occupation	Mail and Email Address, Phone	Years Known
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**PERSONAL REFERENCES**

Name	Occupation	Mail and Email Address, Phone	Years Known
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1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

APPLICANT'S STATEMENT

I understand that the employer follows an "employment at will" policy, in that the employer or I may terminate my employment at any time, or for any reason consistent with applicable state or federal law. I understand that this application is not a contract of employment.

I understand this application will be active for a period of three (3) months; after that time, if I wish to be considered for employment, I must submit a new application.

I understand that the employer will thoroughly investigate my work and personal history and verify all data given on this application, on related papers and interviews, as well as viewing any of my social media accounts. I authorize all individuals, schools and firms named therein, except my current employer if so noted, to provide any information requested about me, and I release them from all liability for damage in providing this information. I further understand that this information will be kept in strict confidence and will be available only to agency personnel who are involved in the hiring decision, and that, if the reference information I have provided is inaccurate or incomplete, I may not be considered for employment.

I certify that all the statements herein are true and understand that any falsification or willful omission shall be sufficient for dismissal or refusal of employment.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Fremont County employs people on the basis of their qualifications and with assurance of equal opportunity and treatment, regardless of race, creed religion, color, sex, age, national origin, ancestry or disability.