

**BENTON COUNTY, IOWA**

**APPLICATION FOR EMPLOYMENT**

Benton County provides equal employment opportunities to all applicants for employment and to all employees and does not discriminate on the basis of age, race, creed, color, sex (including pregnancy), sexual orientation, gender identity, national origin, religion, physical or mental disability, or any other legally protected status or characteristic.

Please be advised that because Benton County is a public entity, it is subject to the requirements of Chapter 22, Code of Iowa, regarding the examination of public records, and this Application may be subject to examination under that statute.

(PLEASE PRINT)

Position(s) Applied For	Date of Application
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How did you learn about us?

<input type="checkbox"/> Advertisement	<input type="checkbox"/> Job Fair	<input type="checkbox"/> Referral from _____
<input type="checkbox"/> Indeed	<input type="checkbox"/> Website	<input type="checkbox"/> Other _____

Last Name	First Name	Middle Name
Address: <i>Number</i>	<i>Street</i>	<i>City</i>
	<i>State</i>	<i>Zip Code</i>
Telephone Number(s)	Email Address(es)	

Please share briefly why you are interested in employment with Benton County.

Best time to contact you is: \_\_\_\_\_  AM  PM

Preferred method of contact: \_\_\_\_\_ (i.e. specific phone number or email)

Yes  No If you are under 18 years of age, can you provide required proof of your eligibility to work?

Yes  No Have you ever filed an application with Benton County before?  
If yes, give date and position applied for: \_\_\_\_\_

Yes  No Have you ever been employed by Benton County before?  
If yes, give date and position held: \_\_\_\_\_

Yes  No Do any of your relatives or friends work for Benton County?  
If yes, provide name and position or department for each such person:  
\_\_\_\_\_

Yes  No Are you currently employed?

Yes  No May we contact your present employer?

Yes  No Are you authorized to work in the U.S.?

Yes  No Will you now or in the future require sponsorship for employment status (i.e., H-1B visa status, etc.)



**EMPLOYMENT EXPERIENCE**

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor	Hourly Rate/Salary		
		Starting	Final	
Reason for Leaving				
May we contact this employer?				
2. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor	Hourly Rate/Salary		
		Starting	Final	
Reason for Leaving				
May we contact this employer?				
3. Employer		Dates Employed		Work Performed
		From	To	
Address				
Telephone Number(s)				
Job Title	Supervisor	Hourly Rate/Salary		
		Starting	Final	
Reason for Leaving				
May we contact this employer?				

REFERENCES

1. Name _____	Phone _____
Relationship _____	Email Address _____
2. Name _____	Phone _____
Relationship _____	Email Address _____
3. Name _____	Phone _____
Relationship _____	Email Address _____

**ADDITIONAL INFORMATION**

**OTHER QUALIFICATIONS OR SPECIALIZED SKILLS**

Summarize special job-related skills and qualifications acquired from employment or other experience.

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**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigations of all statements contained in this Application for Employment as may be necessary in arriving at an employment decision. In connection with my application for employment with the County, I expressly authorize the release to the County of any records or information which may refer or relate to my application for employment, including, but not limited to, records of schools, law enforcement or criminal justice agencies, social media accounts and previous employers. I hereby release and discharge the County and any other person, firm, agency or corporation from any and all claims and liability which I may have or ever claim to have relating to information provided to the county as part of my application for employment.

I authorize Benton County to conduct a check of the status of my driver's license and my driving record.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Benton County is "at will," which means that the Employee may resign at any time, and the Employer may discharge the Employee at any time with or without cause. It is further understood that the "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of Benton County.

I understand that any offer of employment that is extended to me is considered to be a conditional offer and is subject to successful completion of all required background checks. Identifying information such as my social security number and driver's license number will be requested at the post-offer, pre-employment stage, unless identifying information must be requested earlier in the hiring process for positions such as law enforcement positions.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand also, that I will be required to abide by all rules and regulations of the Employer.

I agree to give Benton County permission to complete appropriate background checks.                      YES                      NO

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

\_\_\_\_\_  
Date

**BENTON COUNTY AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION**

I, \_\_\_\_\_ do hereby authorize a review of, and full disclosure of, all records concerning myself to a duly authorized agent of Benton County, Iowa or the Benton County Sheriff’s Office, whether the said records are of a public, private or confidential nature. The intent of this authorization is to give my consent for full and complete disclosure of records of educational institutions, financial or credit institutions, including records of loans, records of commercial or retail credit agencies (including credit reports and/or ratings) and other financial statements of records whenever filed; medical and psychiatric treatment and/or consultation, including hospitals, clinics, private practitioners, and the U.S. Veterans Administration; employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me; and the recollections of attorneys at law, or of other counsel whether representing me or another person in any case, either criminal or civil, in which I personally have, or have had an interest.

I understand that any information obtained by a personal history background investigation which is developed directly or indirectly, in whole or in part, upon which this release authorization will be considered in determining my suitability for employment by Benton County, Iowa and the Benton County Sheriff’s Office. I also certify that any person(s) who may furnish such information in good faith concerning me shall not be held accountable for giving this information; and I do hereby release said person(s) from any and all liability which may be incurred as a result of furnishing such information. I further release Benton County, Iowa and the Benton County Sheriff’s Office from any and all liability which may be incurred as a result of collection of such information.

**I HEREBY SWEAR AND AFFIRM THAT EACH STATEMENT AND ALL INFORMATION IN OR SUPPLEMENTING THIS APPLICATION ARE COMPLETE, TRUE AND ACCURATELY RECORDED TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT PROVIDING FALSE, MISLEADING AND/OR INCOMPLETE INFORMATION ON THIS APPLICATION IS GROUNDS FOR EXCLUSION FROM THE SELECTION PROCESS OR DISCHARGE IF DISCOVERED SUBSEQUENT TO EMPLOYMENT.**

A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

**I have read and fully understand the contents of the “Authorization of Personal Information”.**

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

\_\_\_\_\_  
Date