



# CRAWFORD COUNTY CIRCUIT CLERK

An Equal Opportunity Employer  
**Employment Application**



| APPLICANT INFORMATION   |                              |                             |                 |                  |      |
|---|------------------------------|-----------------------------|-----------------|------------------|------|
| Last Name   |                              | First                       |                 | M.I.             | Date |
| Street Address  |                              |                             |                 | Apartment/Unit # |      |
| City  |                              | State                       |                 | ZIP              |      |
| Phone   |                              | E-mail Address              |                 |                  |      |
| Date Available  |                              |                             | Desired Salary  |                  |      |
| Position Applied for  |                              |                             |                 |                  |      |
| How did you learn of this position?   |                              |                             |                 |                  |      |
| Are you 18 years of age or older?   | YES <input type="checkbox"/> | NO <input type="checkbox"/> |                 |                  |      |
| Are you a citizen of the United States, or are you authorized to work in the United States? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |                 |                  |      |
| Have you or a family member ever worked for Crawford County?                                | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If so, when?    |                  |      |
| Have you ever been convicted of any law violation other than a traffic violation?           | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If yes, explain |                  |      |

| EDUCATION   |  |         |  |
|-------------|--|---------|--|
| High School |  | Address |  |
| College     |  | Address |  |
| Other       |  | Address |  |

| REFERENCES   |  |              |  |
|--|--|--------------|--|
| <i>Please list two (2) professional references and one (1) personal reference.</i> |  |              |  |
| Full Name  |  | Relationship |  |
| Company  |  | Phone        |  |
| Address  |  |              |  |
| Full Name  |  | Relationship |  |
| Company  |  | Phone        |  |
| Address  |  |              |  |
| Full Name  |  | Relationship |  |
| Company  |  | Phone        |  |
| Address  |  |              |  |

**PREVIOUS EMPLOYMENT**

|  |                 |                    |                  |
|--|-----------------|--------------------|------------------|
| Company  |                 | Phone              |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From:  | To:             | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |

|  |                 |                    |                  |
|--|-----------------|--------------------|------------------|
| Company  |                 | Phone              |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From:  | To:             | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |

|  |                 |                    |                  |
|--|-----------------|--------------------|------------------|
| Company  |                 | Phone              |                  |
| Address  |                 | Supervisor         |                  |
| Job Title  | Starting Salary | \$                 | Ending Salary \$ |
| Responsibilities   |                 |                    |                  |
| From:  | To:             | Reason for Leaving |                  |
| May we contact your previous supervisor for a reference?    YES <input type="checkbox"/> NO <input type="checkbox"/> |                 |                    |                  |

**MILITARY SERVICE**

|                   |       |     |
|-------------------|-------|-----|
| Branch            | From: | To: |
| Rank at Discharge |       |     |

**DISCLAIMER AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.  
 If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

|           |      |
|-----------|------|
| Signature | Date |
|-----------|------|