

WORK EXPERIENCE (Most recent first)

Employer	Telephone Number			From (Month/Year)
Address (Mailing)	(City)	(State)	(Zip)	To (Month/Year)
Job Title	Reason for Leaving			Hours Worked Per Week
Specific Job Duties				Last Salary (Voluntary)
				Supervisor
				May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number			From (Month/Year)
Address (Mailing)	(City)	(State)	(Zip)	To (Month/Year)
Job Title	Reason for Leaving			Hours Worked Per Week
Specific Job Duties				Last Salary (Voluntary)
				Supervisor
				May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer	Telephone Number			From (Month/Year)
Address (Mailing)	(City)	(State)	(Zip)	To (Month/Year)
Job Title	Reason for Leaving			Hours Worked Per Week
Specific Job Duties				Last Salary (Voluntary)
				Supervisor
				May We Contact This Employer? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Employer	Telephone Number			From (Month/Year)
Address (Mailing)	(City)	(State)	(Zip)	To (Month/Year)
Job Title	Reason for Leaving			Hours Worked Per Week
Specific Job Duties				Last Salary (Voluntary)
				Supervisor
				May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby affirm that the information provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I also agree that falsified information or significant omissions may disqualify me from further consideration for employment and may be considered justification for dismissal if discovered at a later date.

If employed by the Cullman County Commission, I agree to review and abide by the Alabama Code of Ethics, Section 36-23-1 thru 20, Ala. Code 1975, as amended, and policies and procedures of the Cullman County Commission, which includes the Cullman County Commission's Anti-Harassment policy and Drug Policy. I further understand that while in a part-time, temporary or probationary status, my employment can be terminated, with or without cause or notice, at any time, at the discretion of the Cullman County Commission or myself.

If employed by the Cullman County Commission, I understand and agree that I may be required to take a pre-employment drug and alcohol screening test. I also consent to the release of the test results to the Cullman County Commission for its use, and I understand that any positive drug or alcohol result may preclude my employment. The Cullman County Commission may conduct a pre-employment background check, including, but not limited to, criminal, drivers' license, and reference checks.

By typing or signing my name in the following space, I certify the above statements to be true and correct, to the best of my knowledge, and I agree that this information can be used for the purpose of processing my employment application and information.

Signature of Applicant _____ **Date** _____