

**GEAUGA COUNTY BOARD OF COMMISSIONERS**  
**APPLICATION INFORMATION**

470 Center Street, Building 4, Chardon OH 44024 Attn: Human Resources

ONLY SOLICITED APPLICATIONS WILL BE ACCEPTED.  
Please Read The Following Information Before Completing Our Application.

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1. There is no guarantee of a job offer or job interview by completing our employment application. Your application will be considered with others who have submitted applications for the same job opportunity, and decisions about interviews will be based on this comparison.
2. Our application form must be completely filled out, signed and dated, or you may not be considered for employment. All questions must be answered appropriately. The application must be completed in its entirety. Responding with “see resume” or “see attached” or “available upon request” is not acceptable.
3. If the information provided on our application cannot be satisfactorily verified by employment reference checks, your application could be considered as incomplete.
4. We do not accept or maintain on file unsolicited applications. Applications are filed according to specific job opportunities.
5. A new application must be completed for any other posted job opportunities.
6. Due to the large number of applications received and the competitive nature of our employment process, specific reasons for employment decisions will not be released.
7. By completing our employment application, you may be subject to the following checks:
  - a. Employment reference check from previous employer(s) and from current employer
  - b. Criminal record check
  - c. Drug screen, alcohol screen, and/or pre-placement physical exam
  - d. Abstract Driving Record
  - e. Personal references
  - f. Educational degrees
8. The offer of employment may be contingent upon the successful completion of a pre-employment drug screen, alcohol screen, background investigation, valid and acceptable driving record, physical, psychological, and polygraph tests.
9. Geauga County, its representatives, members or agents will contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions to verify the accuracy of information provided in the application.
10. The information contained in your application for employment may be a public record.

## APPLICATION FOR EMPLOYMENT

Return to: **GEAUGA COUNTY BOARD OF COMMISSIONERS**  
470 Center Street, Building 4, Chardon OH 44024 Attn: Human Resources

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of this department. We are an equal opportunity employer and do not discriminate on the basis of race, color, religion, sex, age, national origin, disability, military status, ancestry, genetic information or any other similarly protected status.

**PLEASE PRINT CLEARLY OR TYPE**

Posted Job Opportunity for \_\_\_\_\_ Date of application \_\_\_\_\_

Do you hold a valid driver's license, if driving is an essential job function? \_\_\_\_ Yes \_\_\_\_ No

Name \_\_\_\_\_

last

first

middle

Address \_\_\_\_\_

street

city

state

zip

Telephone (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Date you can start work \_\_\_\_\_

Are you legally eligible for employment in the United States? \_\_\_\_ Yes \_\_\_\_ No

If under 18, can you furnish a work permit? \_\_\_\_ Yes \_\_\_\_ No

Are you able to meet the attendance requirements of this position? \_\_\_\_ Yes \_\_\_\_ No

Are you able to work overtime if necessary? \_\_\_\_ Yes \_\_\_\_ No

Can you travel if the job requires it? \_\_\_\_ Yes \_\_\_\_ No

List any relatives or friends who are employed by the county \_\_\_\_\_

How were you referred to this posting? \_\_\_\_\_

Type of employment desired: \_\_\_\_ full time \_\_\_\_ part time \_\_\_\_ temporary \_\_\_\_ intermittent

\_\_\_\_ seasonal \_\_\_\_ student help/summer help

Have you been provided with a written job description for the position for which you have applied? \_\_\_\_

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the essential duties, responsibilities, and functions of the job for which you have applied? \_\_\_\_\_

Have you ever been employed by Geauga County? \_\_\_\_ When, By Whom? \_\_\_\_\_

Is there any information we would need about your name, or use of another name, for us to be able to check your work record? Please specify: \_\_\_\_\_

### EDUCATIONAL BACKGROUND

	School Address and Phone No.	Course of Study	Years Completed	Degree/Diploma Obtained
Name of High School				
Name of Undergraduate College or Trade School				
Name of Graduate or Professional School				
Other (specify)				

### SKILLS AND QUALIFICATIONS

Describe briefly the experience, education, training, and other factors that qualify you for the position for which you are applying \_\_\_\_\_

\_\_\_\_\_

EMPLOYMENT HISTORY – LIST YOUR MOST RECENT JOB FIRST. ATTACH ADDITIONAL PAGES TO LIST

ALL JOBS, IF NECESSARY. DO NOT USE "SEE RESUME" OR "SEE ATTACHED" IN LIEU OF COMPLETING THIS APPLICATION.

Start: Left:	Employer: Address:  Supervisor: Phone:	Type of Business: Position/Duties:  Reason for Leaving:	Final Rate of Pay
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Start: Left:	Employer: Address:  Supervisor: Phone:	Type of Business" Position/Duties:  Reason for Leaving:	Final Rate of Pay

Please explain any gaps in employment: \_\_\_\_\_

**REFERENCES: Must be listed. Do NOT include former employers or relatives.**

Name	Address and Telephone	Occupation	Years Known
1.			
2.			
3.			

Please list any additional information which may be helpful to us when considering your qualifications for the position: \_\_\_\_\_

**Applicant Certification and Agreement (Signature Required for Application to be Complete):**

I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with Geauga County and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from County service whenever it is discovered. I expressly authorize Geauga County, its representatives, members or agents the right to investigate and verify any information obtained through the application process. I authorize all individuals, schools, and firms named therein to provide any information requested about me, and I release them from all liability for damage in providing relevant, job related information that will assist in this process.

I recognize that an offer of employment may be contingent upon successful completion of a pre-employment drug screen, alcohol screen, background investigation, valid and acceptable driving record, physical, psychological, and polygraph tests. I understand that all conditions of employment including, but not limited to hours, benefits and salary are subject to change by Geauga County at any time. I understand that no representative of Geauga County is authorized to make any assurances to the contrary and that no implied, oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Appointing Authority.

I understand that a new application must be completed for any future job postings or employment opportunities.

I certify that all information I have provided in order to apply for and obtain employment with Geauga County is true, complete, and correct.

\_\_\_\_\_  
Applicant Signature (Required)

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

GEAUGA COUNTY BOARD OF COMMISSIONERS  
**AFFIRMATIVE ACTION VOLUNTARY INFORMATION**

**Completing of this form is voluntary. Not for interview purposes. Filed separately from application.**

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We consider all applicants for positions without regard to race, color, religion, sex, national origin, age, disability, military status, ancestry, genetic information, or other similarly protected status.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is strictly voluntary. Your cooperation is appreciated.

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Position(s) applied for \_\_\_\_\_ Date \_\_\_\_\_

Please check Referral Source:

<input type="checkbox"/> Walk In/Post in Lobby	<input type="checkbox"/> Newspaper	<input type="checkbox"/> County Website
<input type="checkbox"/> Employee	<input type="checkbox"/> School	<input type="checkbox"/> Relative
<input type="checkbox"/> Government Employment Agency	<input type="checkbox"/> Other _____	

Applicant Information:    Male     Female     Disabled?     Yes     No

Veteran:  No    If Yes:  Vietnam Veteran     Special Disabled Veteran     Other Eligible Veteran

Please check one of the following Equal Employment Opportunity Identification Groups:

- Hispanic or Latino
- White (not Hispanic or Latino)
- Black or African American (not Hispanic or Latino)
- American Indian/Alaskan Native (not Hispanic or Latino)
- Native Hawaiian or Other Pacific Islander
- Asian (not Hispanic or Latino)
- Two or more races (not Hispanic or Latino) – all persons who identify with more than one of the above

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FOR ADMINISTRATIVE USE ONLY – OCRC Job Classifications (EEO-4 Report Local Government)

<input type="checkbox"/> Officials/Administrators	<input type="checkbox"/> Professional	<input type="checkbox"/> Technicians	<input type="checkbox"/> Administrative Support
<input type="checkbox"/> Protective Service	<input type="checkbox"/> Para Professional	<input type="checkbox"/> Skilled Craft	<input type="checkbox"/> Service/Maintenance

Completed by \_\_\_\_\_ Date \_\_\_\_\_