# WAYNE COUNTY ENGINEER APPLICATION FOR EMPLOYMENT

Applicants may request reasonable accommodation in the application/interview process.

## PLEASE PRINT

NAME:						
NAIVIE.	LAST	FIRST		MIDDLE		
ADDRESS:						
	STREET		CITY	STATE	ZIP CODE	iù.
TELEPHONE:	<del></del>	SOCIAL SI	ECURITY NUMBER:		-	
APPLICATION	DATE:	VETERAN	: Yes □ No □Branch of	Service		
ARE YOU LEG	GALLY PERMITTED TO	WORK IN THE UNITED STATES?	Yes 🗌 No 🗆			
		PERSO	NAL DATA			
Position(s) des	sired:				Full-Time   F	art-Time
Have you prev	riously applied for a j	ob with the Wayne County Eng	rineer?		Yes 🗌 No 🗍 V	Vhen:
Have you ever	been employed by the	e Wayne County Engineer?			Yes 🗌 No 🗌	When:
Reason for lea	ving?					
		l by the Wayne County Engine			Ye	s 🗌 No
State name and	d relationship:				.7	
	5	that might interfere with your			) Ye	s 🗌 No
		nother public employer in Ohio			Ye	s 🗌 No
If yes, provide	place and dates of se	rvice				
Are you able	to perform the essen	ial functions of the job(s) for	which you are applyi	ing with or without	reasonable accor	nmodatio
(Should there l	be a question, please	refer to the job description.)			Yes	□ No □
Have you ever been dismissed from or asked to resign from any employment position?  If yes, please explain:			Yes	□ No		

If you are applying for a position that requires a driv please answer the following:	ver's license or a commercial driver's l	icense to perform	the essential d	uties of	the job,
Do you have a valid Ohio driver's license?			Yes 🗌	No 🗌	
Do you have a valid Ohio commercial driver's license			Yes 🗌	No 🗌	
Have you been arrested for any traffic related incider		3	Yes 🗌	No 🗌	
Has your driver's license been suspended or revoked	within the last three (3) years?			Yes 🗌	No 🗌
Have you had your auto insurance rejected, cancelled	d, or been in a high risk insurance prog	ram?			No 🗌
Been involved in any accident, either at fault or not a	t fault?		7	Yes 🗌	No 🗌
Have you had any traffic violations in the past three ( If yes, please list:	(3) years?		2	Yes 🗌	No 🗌
OFFENSE		APPRO	OXIMATE DA	TE/YE	AR
If employed, why do you wish to leave your present	employer?				
May we contact your present employer for a reference of the position of the po	qualified to do by reason of backgrou	nd, education, pre		Yes   ment or t	
List professional organization memberships and offi- origin, political affiliation, disability and/or ancestry:		d indicate race, co	lor, religion, se	x, age,	national
List any licenses held: (e.g. P.E., P.S., Haz Mat CDL	endorsement)				
9	EDUCATIONAL DATA				
	LOCATION	MAJOR	SCHOLASTIC	DID	The state of the s
NAME OF SCHOOL OR COLLEGE HIGH SCHOOL	CITY, STATE, ZIP	SUBJECT/DEGREE	AVERAGE	GRAD	UATE?
mon school					
COLLEGE OR UNIVERSITY					
OTHER SCHOOLS ATTENDED					

OTHER (SPECIFY)

#### EMPLOYMENT DATA

List all previous employment for the last ten (10) years in chronological order - last position first - including U.S. Military. Attach additional pages if needed or resume if desired.

additional pages in	needed of resume if desir	04.			
EMPLOYER			TELEPHONE		
ADDRESS			FINAL SALARY		
DATES EMPLOYED		POSITION(S) HELD	SUPERVISOR		
FROM	то		4.0		
REASON FOR LEAVING		•			
EMPLOYER			TELEPHONE		
ADDRESS			FINAL SALARY		
DATES EMPLOYED	¥	POSITION(S) HELD	SUPERVISOR		
FROM	то				
REASON FOR LEAVING					
EMPLOYER			TELEPHONE		
			3		
ADDRESS		2	FINAL SALARY		
DATES EMPLOYED		POSITION(S) HELD	SUPERVISOR		
FROM	то				
REASON FOR LEAVING					

# PERSONAL REFERENCES OTHER THAN FORMER EMPLOYERS AND RELATIVES

NAME	ADDRESS AND TELEPHONE	OCCUPATION
1.		
2.		
3.		
10000		

	ty Engineer are evaluated and selected on the basis or re selected and hired without consideration of race,	
that any material omission, misrepresentation employment. I hereby authorize the investigati or any of my previous employers, references a permission to obtain information related to my for a Moving Vehicle Violation Report if such i	CERTIFICATION  pplication is true, complete and correct to the best or falsification of this information is grounds for on of all statements contained in this application and/or schools for information unless otherwise no prior work history. I also give my consent to containformation is required to perform the duties of the ing information, verbal or written, pursuant to this	or dismissal from or refusal of and give permission to contact all oted in this document, including act the Bureau of Motor Vehicles to position. I indemnify and hold
	APPLICANT'S SIGNATURE	DATE
application each time he/she wishes to be consider	County Engineer for a period of two years, however, ed for a position.  FOR INTERNAL USE ONLY	an Applicant must submit a new
ARRANGE INTERVIEW:		YES □ No □
REMARKS:		
	INTERVIEWER'S SIGNATURE	DATE
EMPLOYED: YES \( \Bar{\cap} \) NO \( \Bar{\cap} \) STARTING	DATE: STARTING RATE	E
JOB TITLE:		

WAYNE COUNTY ENGINEER

3151 West Old Lincoln Way Wooster, OH 44691 Ph: (330) 287-5500

Fx: (330) 287-5520

# WAYNE COUNTY ENGINEER EQUAL EMPLOYMENT OPPORTUNITY

The Ohio Fair Employment Practice Law prohibits employment practices that discriminate based on race, color, religion, sex, age, national origin, qualifying disability, or ancestry. The 1964 Civil Rights Act, Title VII, prohibits discrimination based on race, color, religion, sex, or national origin.

The Ohio Administrative Code, Section 4112-5-04, requires the Wayne County Engineer to record and report the information listed below. Please help us comply by providing the answers to the following questions.

This Equal Employment Opportunity Form will be kept in a CONFIDENTIAL FILE separate from the Application for Employment. It will not be used to determine employment eligibility.

POSITION APPLIED	FOR:	
RACE/ETHNIC GROU	UP:	American Indian/Alaskan Native Asian/Pacific Islander Hispanic Black White Other
SEX:		Female Male
VIETNAM ERA VET	ERAN:	Yes No
DISABLED VETERA	N:	Yes No
		MEDICAL CONDITION THAT NEEDS TO BE YOU WITH AN ACCESSIBLE WORK
		Yes No
REFERRED BY:	☐ Job Posting☐ Friend	☐ Newspaper:

Thank you for completing this form.

THIS INFORMATION IS TO BE UTILIZED FOR AFFIRMATIVE ACTION USE ONLY.

### WAYNE COUNTY ENGINEER DRIVER CONSENT FORM

To be included in the application for all prospective new employees required to obtain a Commercial Driver's License as an essential function of the job. Applicant's name First Middle Last Ohio CDL Number Position applied for: I understand that as a condition of employment, and pursuant to the Federal Motor Carrier Safety Regulations, I must have a current and valid Ohio Driver's License and an acceptable driving record which meets the standards of the County's auto liability insurer. I understand that I must provide, with my application, proof of personal auto liability insurance that meets the requirements of the State of Ohio and existing County minimum requirements. I further agree that, pursuant to Section 382.413, the Wayne County Engineer may obtain information on any previous alcohol tests with a concentration result of 0.04 or greater, positive controlled substances test results, and any refusals to be tested within the preceding two years that are maintained by my previous employer. I further agree that the county as my employer may check my driving record at any time. I agree to report to my supervisor any accidents, arrests, suspensions, or cancellations of personal insurance as soon as possible after they occur and prior to driving any vehicle on behalf of the county. I understand all of the above and agree to all requirements. I further attest that all statements made by me in this report are true to the best of my knowledge. Applicant date