

APPANOOSE COUNTY SECONDARY ROADS

1200 HWY 2 WEST
CENTERVILLE IA 52544

641-856-6193 (P)
641-437-4665 (F)

PERSONAL

Full Name: _____
First Middle Initial Last

Current Address: _____
Number Street City State Zip

Telephone Number: () _____ Social Security Number: _____

Are you 18 years of age or older? Yes ☐ No ☐ Are you legally able to work in the
Are you a military Veteran? Yes ☐ No ☐ the United States? Yes ☐ No ☐

If Yes, Date of Active

Do You Claim Veteran's Preference? Driver's License Class _____
Yes ☐ No ☐ Endorsements _____

Have you ever been known by any other name(s) that this company will require to verify any of the
information on this application? Yes ☐ No ☐

EMPLOYMENT DESIRED

Job Title: _____ Date you can start: _____
Wage Desired: _____

Are you available for work: Full-Time ☐ Part-Time ☐ Shift Work ☐ Seasonal ☐

EDUCATION

Do you have a High School Diploma or GED? Yes ☐ No ☐

Name of last school attended: _____ City: _____ State _____

Circle last year of school completed: 6 7 8 9 10 11 12 13 14 15 16 17 18

Circle highest degree earned: High School Diploma GED Certificate AA BD MD PHD Other

Area of Concentration and/or degree(s), certificates, licenses, endorsements: _____

Other Training or Skills (Factory or Office Machines Operated, Special Courses, Computer Skills, etc):

EMPLOYMENT HISTORY

Former Employment (List employers, starting with the most recent. Explain all gaps in time of employment.)

Company Name: _____ Job Title: _____

Address: _____

Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____

Reason for Leaving: _____

Company Name: _____ Job Title: _____

Address: _____

Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____

Reason for Leaving: _____

Company Name: _____ Job Title: _____

Address: _____

Number Street City State Zip

Start Date: ____ / ____ / ____ End Date: ____ / ____ / ____ Rate of Pay: _____

Detailed Job Duties: _____

Reason for Leaving: _____

May we contact your former employers to verify this information? Yes ☐ No ☐

May we contact your present employer? Yes ☐ No ☐

The law prohibits discrimination in hiring due to age, race color, creed, sex, national origin, religion or disability.

Please provide any additional information about your abilities or interests that makes you a good candidate for this position (use additional papers if necessary):

I authorize investigation of all statements contained in the application. I understand that omission or misrepresentation of facts is cause for dismissal.

Signature: _____ Date: _____