



SARPY COUNTY PERSONNEL DEPARTMENT
Southeast Annex
 1308 Gold Coast Road, Suite 200
 Papillion, NE 68046-2895
 (402) 593-4486 or 593-4485

For Personnel Use:

EMPLOYMENT APPLICATION: Safety Sensitive Positions

PRINT OR TYPE IN BLACK INK - These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "N/A". Be sure to sign when completed. You may make copies of this application and enter different position titles, but each copy must have an *original* signature. Resumes *will not be accepted* in lieu of applications.

Sarpy County assures equal employment opportunity to applications and employees in all aspects of Personnel Administration without regard to political affiliation, race, color, national origin, sex, age, marital status, pregnancy, mental or physical disability, religion, military status, or any other prohibited basis of discrimination, as provided under applicable state and federal law. FEDERAL LAW OBLIGATES US TO PROVIDE REASONABLE ACCOMMODATION TO THE KNOWN DISABILITIES OF APPLICANTS AND EMPLOYEES, UNLESS TO DO SO WOULD POSE AN UNDUE HARDSHIP. PLEASE FEEL FREE TO LET US KNOW IF YOU NEED AN ACCOMMODATION TO COMPLETE THE APPLICATION PROCESS, POSSIBLE SCREENING EXAMINATIONS, OR TO PERFORM ANY ESSENTIAL ELEMENTS OF THE POSITION SOUGHT.

Name (Last)	(First)	(Middle)	Maiden Name/Other Names/Alias
Mailing Address (Street)			Work Phone Number
(City)			May we call here? <input type="checkbox"/> Yes <input type="checkbox"/> No
(State)		(Zip Code)	Home Phone Number

Are you legally able to work in the United States? Yes No

If hired, you will be required to submit documents sufficient to establish employment authorization and identity in compliance with the Immigration Reform and Control Act of 1986.

LIST EXACT TITLE or position for which you wish to apply.

(Separate application for EACH position is required)	Minimum Salary Desired
	\$

I UNDERSTAND THAT IF THE POSITION FOR WHICH I AM APPLYING REQUIRES THAT I BE A LEGALLY LICENSED OPERATOR OF A COMMERCIAL MOTOR VEHICLE, THE INFORMATION CONTAINED ON THIS APPLICATION WILL BE USED AND THAT PRIOR EMPLOYERS WILL BE CONTACTED FOR PURPOSES OF INVESTIGATION, IF REQUIRED BY SEC. 391.23 OF DEPARTMENT OF TRANSPORTATION REGULATIONS.

Have you ever been convicted of a felony? Yes No

If your answer is "yes", explain in concise detail on a separate sheet of paper, giving the date and nature of the offense, the name and location of the court, and the disposition of the case(s). A conviction does not necessarily disqualify you; the recency, severity, and pertinence of the conviction to the job will be considered. A false statement WILL disqualify you.

EDUCATION (Note: Applicants MAY be required to provide proof of diploma, degree, transcripts, licenses, certifications and registrations.)

Circle Highest Grade Completed: 8 9 10 11 12 Did you graduate/achieve GED? Yes No

Type of School	School Name and Location	Dates Attended		Graduated		Diploma/Degree	Major/Minor Field of Study
		From	To	Yes	No		
Undergraduate College (s) or Univ.							
Graduate School (s)							
Technical, Vocational or Business School (s)							

If a license, certificate, or other authorization is required or related to the position for which you are applying, complete the following:

License Certification	Date Issued	Issued by (State or Authority)	License No.	Location of Issuing Authority (City/State)



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EMPLOYMENT HISTORY

This information will be the official record of your employment history and must accurately reflect all significant duties performed. Summary of experience should clearly describe your qualifications. A resume may be attached, but *not substituted* for the requested information.

1. Include employment for the last TEN years. Begin with your current or last position and work back.
2. Employment history should include each position held, even those with the same employer.
3. Give a brief summary of the technical and, if appropriate, the managerial responsibilities of each position you have held.

Name of Employer (Current /Last)		Address		Telephone #
Employed (Mo. & Yr.)		Pay Rate:	Reason for Leaving	
From To		Start		
		Finish		
Full-time <input type="checkbox"/>	Job TITLE & Responsibilities (Use additional pages if necessary)			Supervisor: May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Part-time <input type="checkbox"/>				
Temporary <input type="checkbox"/>				Were you subject to DOT regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No
Were you subject to DOT drug/alcohol testing? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Name of Employer		Address		Telephone #
Employed (Mo. & Yr.)		Pay Rate:	Reason for Leaving	
From To		Start		
		Finish		
Full-time <input type="checkbox"/>	Job TITLE & Responsibilities (Use additional pages if necessary)			Supervisor
Part-time <input type="checkbox"/>				
Temporary <input type="checkbox"/>				Were you subject to DOT regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No
Were you subject to DOT drug/alcohol testing? <input type="checkbox"/> Yes <input type="checkbox"/> No				
Name of Employer		Address		Telephone #
Employed (Mo. & Yr.)		Pay Rate:	Reason for Leaving	
From To		Start		
		Finish		
Full-time <input type="checkbox"/>	Job TITLE & Responsibilities (Use additional pages if necessary)			Supervisor
Part-time <input type="checkbox"/>				
Temporary <input type="checkbox"/>				Were you subject to DOT regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No
Were you subject to DOT drug/alcohol testing? <input type="checkbox"/> Yes <input type="checkbox"/> No				



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Name of Employer		Address		Telephone #
Employed (Mo. & Yr.)		Pay Rate	Reason for Leaving	
From	To	Start	Supervisor	
		Finish		
Full-time <input type="checkbox"/>	Job TITLE & Responsibilities (Use additional pages if necessary)			Were you subject to DOT regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No
Part-time <input type="checkbox"/>				Were you subject to DOT drug/alcohol testing? <input type="checkbox"/> Yes <input type="checkbox"/> No
Temporary <input type="checkbox"/>				

Name of Employer		Address		Telephone #
Employed (Mo. & Yr.)		Pay Rate	Reason for Leaving	
From	To	Start	Supervisor	
		Finish		
Full-time <input type="checkbox"/>	Job TITLE & Responsibilities (Use additional pages if necessary)			Were you subject to DOT regulations? <input type="checkbox"/> Yes <input type="checkbox"/> No
Part-time <input type="checkbox"/>				Were you subject to DOT drug/alcohol testing? <input type="checkbox"/> Yes <input type="checkbox"/> No
Temporary <input type="checkbox"/>				

RESIDENCES (Previous ten years): Address, City, State, Zip		FROM	TO

MILITARY SERVICE (A copy of DD214 report from the Armed Services *may* be required at a later date). Yes No

Dates of Service: From _____ To _____ Branch _____

SPECIAL SKILLS/QUALIFICATIONS

Do you type? Yes No WPM _____

Do you speak a language in addition to English? Please list. _____

List any equipment or machines with which you are proficient _____

List any computer software with which you are proficient _____

Have you been given a copy of the job description? _____

Are you able to perform the essential functions of the job, with or without reasonable accommodation? Yes No

PLEASE LIST THREE REFERENCES:

NAME	ADDRESS	TELEPHONE NUMBER



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TRUCK DRIVING EXPERIENCE				
Class of Equipment	Type of Equipment (Van, Flat, Tank, etc)	Dates		Approximate Number of Hours/Miles
		From	To	
Straight Truck				
Tractor and Semi-Trailer				
Material Handling Equipment				
Other:				

◆ Have you EVER been denied a license, permit, or privilege to operate a motor vehicle? Yes No
 If yes, Where? _____ When? _____
 Why? _____

◆ Has any license, permit, or privilege been suspended or revoked? Yes No
 If yes, Where? _____ When? _____
 Why? _____

◆ Is your driving privilege limited in any way, such as probation, area of operation, limitations of hours, etc. at this time?
 Yes No
 If yes, _____ Why? _____

SPECIAL SKILLS and QUALIFICATIONS

Summarize special skills and qualifications acquired from employment or other experiences:

THANK YOU for considering employment with Sarpy County. Our highly professional organization is committed to public service and meeting the needs of our citizens and visitors. We hope you find our extensive application process to be uncomplicated. Depending on the number of applications and any examination requirements, we strive to complete the entire hiring process within one month of the position closing. The County selects the best and most qualified candidate for each vacancy, without regard to familial or political affiliation or influence. If you have questions about Sarpy County's hiring procedures, please contact us.

Personnel Department



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Mail or bring your completed application to the Sarpy County Personnel Department at the address listed above. The Personnel Department cannot be responsible for applications sent directly to departments, individuals or other public or private agencies.

NOTICE: Please note that portions of your application may be deemed a public record pursuant to Neb Rev. Stat. §84-712 and for that reason may be made available to the public for viewing.

Interviews are not conducted at the time of application. When applying for a position that is currently available, your application will be reviewed. While we appreciate your interest in securing a position with us, only those most qualified will receive a response.

This application is valid only for the open position for which it is submitted. We require that you resubmit a written application per opening in order to be considered for future postings.

Sarpy County is an equal opportunity employer and will not discriminate against any employee or applicant for employment in a manner that violates the law. Accommodations are available for applicants with disabilities in all phases of the application and employment process. Contact the Personnel Department for an auxiliary aid or service.

Sarpy County maintains a drug free workplace and will not tolerate the use, possession or distribution of illegal substances. Employees must abide by the County's drug and alcohol use/abuse screening procedures.

Once again, thank you for your interest in Sarpy County employment.

READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING:

I AFFIRM THIS APPLICATION CONTAINS NO MISREPRESENTATION OR FALSIFICATIONS AND THAT THE INFORMATION GIVEN BY ME IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM AWARE THAT SHOULD AN INVESTIGATION AT ANY TIME DISCLOSE ANY SUCH MISREPRESENTATION, OMISSION, OR FALSIFICATION, MY APPLICATION WILL BE REJECTED OR, IF EMPLOYED BY THE COUNTY, I MAY BE TERMINATED FROM EMPLOYMENT. I UNDERSTAND THAT I MUST PASS A CRIMINAL BACKGROUND INVESTIGATION, CREDIT CHECK AND PASS TESTING FOR ALCOHOL AND SUBSTANCE USE/ABUSE, AS A CONDITION OF EMPLOYMENT, AND THAT I MAY BE REQUIRED TO UNDERGO AN EVALUATION TO DETERMINE WHETHER I CAN PERFORM THE JOB DUTIES OF THE POSITION. I ALSO UNDERSTAND THAT DIRECT DEPOSIT OF PAY IS A CONDITION OF EMPLOYMENT. I UNDERSTAND THAT IF I AM EMPLOYED, I WILL SERVE AN INTRODUCTORY PERIOD OF AT LEAST SIX (6) MONTHS AND SUBJECT TO TERMINATION WITHOUT RIGHT TO APPEAL DURING THIS INTRODUCTORY PERIOD. I HAVE THE RIGHT TO TERMINATE MY EMPLOYMENT AT ANY TIME AND SARPY COUNTY RETAINS THE SAME RIGHT, REGARDLESS OF ANY ORAL REPRESENTATIONS TO THE CONTRARY. I FURTHER AUTHORIZE ANY AND ALL OF MY CURRENT OR PREVIOUS EMPLOYERS, ASSOCIATES, OR REFERENCES TO PROVIDE THE PERSONNEL DEPARTMENT, ANY COUNTY OFFICE/DEPARTMENT, AND/OR REPRESENTATIVE ANY INFORMATION CONCERNING MY EMPLOYMENT RECORD OR CHARACTER. I HEREBY HOLD HARMLESS AND RELEASE FROM ANY AND ALL LIABILITY OR DAMAGE WHICH MAY RESULT FROM FURNISHING OR RECEIVING INFORMATION REQUESTED BY SARPY COUNTY, SARPY COUNTY PERSONNEL DEPARTMENT, AND ANY AND ALL OF ITS AUTHORIZED AGENTS. I ALSO INDEMNIFY SARPY COUNTY AGAINST ANY LIABILITY THAT MIGHT RESULT FROM MAKING SUCH INVESTIGATIONS. ADDITIONALLY, I AUTHORIZE THAT COPIES OF THIS APPLICATION MAY BE FURNISHED TO INTERESTED COUNTY OFFICES/DEPARTMENTS OR OTHER PARTIES WITH AN INTEREST THAT SARPY COUNTY DEEMS APPROPRIATE. FINALLY, I UNDERSTAND THAT NOTHING CONTAINED IN THIS EMPLOYMENT APPLICATION OR IN THE GRANTING OF AN INTERVIEW IS INTENDED TO CREATE A CONTRACT BETWEEN SARPY COUNTY AND MYSELF FOR EITHER EMPLOYMENT OR FOR THE PROVIDING OF ANY BENEFIT ARISING FROM EMPLOYMENT. NO PROMISES OF EMPLOYMENT HAVE BEEN MADE TO ME.

IN ACCORDANCE WITH FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION AND DEPARTMENT OF TRANSPORTATION REGULATIONS, EACH INDIVIDUAL CONDITIONALLY HIRED FOR A SAFETY SENSITIVE POSITION IS SUBJECT TO MANDATORY DRUG AND ALCOHOL TESTING. I UNDERSTAND, IF HIRED TO A SAFETY SENSITIVE POSITION, THAT I AM SUBJECT TO RANDOM, POST ACCIDENT, REASONABLE/SUSPICION, RETURN TO DUTY AND FOLLOW-UP DRUG AND ALCOHOL TESTING. FAILURE TO COMPLY WITH FEDERAL MANDATES AND CITY/COUNTY POLICY COULD RESULT IN DISCIPLINE UP TO, AND INCLUDING, TERMINATION.

I FURTHER UNDERSTAND, WITH RESPECT TO ANY OF MY EMPLOYMENT DURING THE PAST THREE YEARS THAT WAS SUBJECT TO DOT REGULATIONS, THAT I HAVE THE FOLLOWING RIGHTS: (1) TO REVIEW ANY DOT-REQUIRED INFORMATION PROVIDED BY THOSE EMPLOYERS TO THE COUNTY, IF I MAKE A WRITTEN REQUEST TO THE COUNTY FOR SAME WITHIN 30 DAYS AFTER BEING EMPLOYED OR BEING NOTIFIED OF DENIAL OF EMPLOYMENT; (2) TO HAVE ANY ERRORS IN THE INFORMATION CORRECTED BY THE PRIOR EMPLOYER AND FOR THAT EMPLOYER TO RE-SEND CORRECTED INFORMATION TO THE COUNTY; AND (3) TO HAVE A REBUTTAL STATEMENT ATTACHED TO THE ALLEGED ERRONEOUS INFORMATION, IF MY PRIOR EMPLOYER AND I CANNOT AGREE ON THE ACCURACY OF THE INFORMATION.

Signature of Applicant

Date

NOTE: Unsigned Applications will NOT be considered.



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EQUAL EMPLOYMENT OPPORTUNITY QUESTIONNAIRE

We are required to keep information on applicant gender, race, and ethnic background in compliance with federal law. This information will be detached and kept separately from your application. It will not be used as a basis for making employment decisions. Your cooperation is greatly appreciated.

Position applied for:

What is your age?

- 18 or younger
- 19-29
- 30-39
- 40-49
- 50-59
- 60-69
- 70 or over

Highest level of education you attained?

- 0-8 years
- 9-12 years, but not a high school graduate
- High school graduate or GED
- Post high school – vocational/business
- Some college, less than a BA or BS degree
- BA, BS – similar undergraduate degree
- MA, MS – or similar graduate degree
- Ph.D., JD or similar professional degree
- MD or similar professional degree

Where did you learn of this job?

- Position Posting
- County Employee
- Newspaper
- State Employment Service
- Walk-In
- County Website
- Internet: _____
- Other (specify agency, organization, etc.)

Check *all* applicable boxes:

- Male
- Female
- White
- Black or African American
- Hispanic or Latino
- Asian
- Native Hawaiian or other Pacific Islander
- America Indian/Alaskan Native
- Two or more races
- Other (specify)_____
- Veteran
- Disabled
- Disabled Veteran

Sarpy County is a Drug-Free Workplace / Equal Opportunity Employer