

# LINN COUNTY ASSESSOR'S OFFICE EMPLOYMENT APPLICATION

Linn County Assessor's Office  
 935 2nd Street S.W., Cedar Rapids, Iowa 52404-2100  
 (319) 892-5220 Office (319) 892-5239 Fax

PLEASE USE INK OR TYPE

BE SURE TO SIGN THIS APPLICATION ON BACK

<b>PERSONAL</b>	Name (Last, First, Middle)		Social Security Number
	Number and Street		
	City, State, Zip Code		
	Daytime Phone Number	Home Phone	Are you 18 years old or older? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Have you ever been convicted of a felony in the past five years? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
	Do you object to inquiry of your present or past employers for work reference? ..... <input type="checkbox"/> Yes <input type="checkbox"/> No		
	If you have answered yes to any of the above questions, please explain (A "Yes" answer does not bar you from consideration for employment with Linn County.) _____		

Last Name:

<b>WORK SOUGHT</b>	Position(s) you are applying for:	Are you interested in:
	1. _____	Full Time <input type="checkbox"/> Yes <input type="checkbox"/> No
	2. _____	Part Time <input type="checkbox"/> Yes <input type="checkbox"/> No
	3. _____	Temporary <input type="checkbox"/> Yes <input type="checkbox"/> No
	4. _____	On what date would you be available for work? _____
Please indicate how you found out about this opening:		
<input type="checkbox"/> County Employee <input type="checkbox"/> Posting on Bulletin Board <input type="checkbox"/> Internet <input type="checkbox"/> DES Work Force Center <input type="checkbox"/> Contacted County on Own <input type="checkbox"/> Job Line <input type="checkbox"/> Newspaper, Private Employment Agency, or other source: (Indicate here) _____		

First Name:

<b>TRAINING</b>	Institution (Name, City, State)	Course or Major	Highest Grade Completed Certificate or Degree
	High School: (or indicate if you have a G.E.D.)		
	College:		
	Business, Trade, Apprenticeship, Correspondence, Military, other:		
	If applicable: <input type="checkbox"/> Driver's License <input type="checkbox"/> Commercial Driver's License <input type="checkbox"/> CDL Endorsements _____		

Middle Name:

Date:

LINN COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER M/F

List all employment for past ten years, beginning with the most recent.					
<b>EMPLOYMENT</b>	Employer	Address/Phone	Salary \$ per	From (mo/yr)	To (mo/yr)
	Job Title	Supervisor's Name	Reasons for Leaving		
	Describe Major Job Duties:				
	Employer	Address/Phone	Salary \$ per	From (mo/yr)	To (mo/yr)
	Job Title	Supervisor's Name	Reasons for Leaving		
	Describe Major Job Duties:				
	Employer	Address/Phone	Salary \$ per	From (mo/yr)	To (mo/yr)
	Job Title	Supervisor's Name	Reasons for Leaving		
	Describe Major Job Duties:				
	Employer	Address/Phone	Salary \$ per	From (mo/yr)	To (mo/yr)
	Job Title	Supervisor's Name	Reasons for Leaving		
	Describe Major Job Duties:				
U.S. Military Service Branch/Rank	Dates: From	To	Specialty (Training Received)		

List any other information, skills, special training, or experience that would apply to the performance of the position for which you are applying.

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The facts set forth above in my application for employment are true and complete. I authorize my former employers and educational institutions to give any information they may have regarding me, unless otherwise specified. I also hereby release them and their organizations from all liability for any damage whatsoever for issuing this information. I understand that if employed, false statements or omission of information requested on this application shall be considered sufficient cause for dismissal.

\_\_\_\_\_  
Signature

**FOR OFFICE AND/OR INTERVIEWER USE ONLY:**

- |  |  |
|--|--|
| <input type="checkbox"/> 1. Interview, no offer              | <input type="checkbox"/> 5. No Interview, no longer available/interested       |
| <input type="checkbox"/> 2. Interview, offer, hired          | <input type="checkbox"/> 6. No Interview, does not meet minimum qualifications |
| <input type="checkbox"/> 3. Interview, offer, offer rejected | <input type="checkbox"/> 7. Other  |
| <input type="checkbox"/> 4. No Interview, unable to contact  |  |

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# **VOLUNTARY APPLICANT CHARACTERISTIC SURVEY**

**Employment Relations Office**

**Linn County, Iowa**

## **TO ALL APPLICANTS:**

**Linn County, Iowa has an Affirmative Action Program in effect and we are asking each applicant to VOLUNTARILY give the following information. This information is for statistical purposes only and is not submitted to the individual(s) responsible for interviewing and hiring. Your response to the following questions will not affect you as an applicant for employment with Linn County, Iowa.**

**Thank you for your cooperation in helping Linn County maintain equal employment opportunities.**

## **INSTRUCTIONS:**

**Date \_\_\_\_\_**

**Please check the appropriate space in each question below.**

**A. Male \_\_\_\_\_ Female \_\_\_\_\_**

**B. Of which ethnic/racial group do you consider yourself a member?**

**White \_\_\_\_\_ American Indian \_\_\_\_\_ Hispanic \_\_\_\_\_**

**Black \_\_\_\_\_ Asian American \_\_\_\_\_**

**According to the Immigration Reform and Control Act of 1986, Linn County will only hire United States citizens and aliens lawfully authorized to work in the United States.**