



UTAH COUNTY - EMPLOYMENT APPLICATION Updated: 02-2012

Office of Personnel Management 100 East Center Street, Suite 3800, Provo, UT, 84606
Phone (801) 851-8158 ~ Email : ucpersonnel@state.ut.us ~ Fax (801) 851-8166
www.utahcountyonline.org/jobs

For Office Use Only

TS	
Vet Pref	
Register	
DNMM	
Other	

PLEASE READ INSTRUCTIONS ON PAGE 4 BEFORE COMPLETING APPLICATION

I. APPLICANT INFORMATION

Position Title _____ Posting # _____

Name _____ Soc. Sec. No. XXX - XX - _____

Other names previously used _____

Address _____
Street City State Zip Code

Best contact number: _____ other _____ Email : _____

1. How did you become aware of the position for which you are applying? _____
2. If employed, are you willing to accept the approved salary for the position? ☐ yes ☐ no

II. VETERAN'S PREFERENCE: Please see additional instructions on page 4. This information is voluntary. However, DISCLOSURE OF THE INFORMATION IS REQUIRED IF YOU WISH TO BE GIVEN PREFERENCE.

Do you claim Veteran's Preference?

☐ NO ☐ YES (Please attach documentation)

If Yes: ☐ As a veteran

☐ As a spouse, or as an unmarried widow or widower of a veteran

III. TRAINING AND EDUCATION: You must complete all applicable items in this section. The information you give regarding your training and education will be used to determine if you meet minimum qualifications.

HAVE YOU GRADUATED FROM HIGH SCHOOL OR RECEIVED A HIGH SCHOOL EQUIVALENCY DIPLOMA (GED)

☐ YES ☐ *NO *If no, circle highest year completed: 1 2 3 4 5 6 7 8 9 10 11 12

Name and Location of College or University	Dates		Credits Completed		Major/Minor	Did you Graduate	Type of Degree	Date of Degree
	From	To	Semester Hours	Quarter Hours				
						Yes / No		
						Yes / No		
						Yes / No		

Submit copies of official college or university transcripts with your application if you wish to receive credit for your education.

PROFESSIONAL LICENSE OR CERTIFICATE, IF REQUIRED

Type	Serial Number	Date Issued	Expiration Date

LANGUAGES: List languages you speak, read and write other than English _____

IV. EXPERIENCE: You must complete all applicable items in this section. The information you give regarding your experience will be used to determine if you meet minimum qualifications. Begin with your present or most recent job and describe, in the boxes below, all periods of employment such as paid (full or part time), volunteer (full or part time), self employment, and/or military service. Account for your time during any intervals of unemployment other than when attending school. Attach addendum if necessary, using the same format. Unless requested on job posting, RESUMES WILL NOT BE ACCEPTED.

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

V. REFERENCES: List three persons who are not related to you and who have definite knowledge of your qualifications for the position for which you are applying.

FULL NAME	PRESENT BUSINESS OR HOME ADDRESS (STREET, CITY, STATE, ZIP)	BUSINESS OR OCCUPATION	PHONE NUMBER

- ☐ YES ☐ NO 1. Have you, since the age of 18, been convicted of a crime, excluding minor traffic offenses? If yes, give dates, details and penalties for each occurrence, including dates of any probationary periods on a separate sheet. (Note: Each conviction will be judged in relation to time, seriousness, circumstances, and relationship to the position sought, and will not necessarily bar you from employment.)
- ☐ YES ☐ NO 2. Have you ever been discharged or forced to resign? If yes, please explain on a separate sheet.
- ☐ YES ☐ NO 3. Would accommodation/assistance be helpful to you in taking the examination for this position? If yes, describe on a separate sheet.
- ☐ YES ☐ NO 4. If the position for which you are applying requires driving a vehicle (see posted job announcement), do you possess a current driver's license? If yes, specify state issued: _____ type: _____
- ☐ YES ☐ NO 5. If the position for which you are applying is hazardous in nature, including but not limited to working with or around heavy equipment or hazardous material (see posted job announcement), are you 18 years of age or older?
- ☐ YES ☐ NO 6. Have you ever been employed by Utah County Government? If yes, please include applicable information in the Experience section of this application.
- ☐ YES ☐ NO 7. Are you eligible to work in the U.S.?
- ☐ YES ☐ NO 8. Are you willing to have your current employer contacted regarding your employment record?
- ☐ YES ☐ NO 9. Are you related to someone currently employed by Utah County?
If yes, Name _____ Relationship _____

VI. READ THE FOLLOWING PARAGRAPH CAREFULLY BEFORE SIGNING THIS STATEMENT: I affirm that this application contains no misrepresentation or falsification and that the information is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any such misrepresentation or falsification, my application will be rejected or, if employed by Utah County Government, I may be terminated from employment. **I further authorize any of my employers (subject to my answer to the previous question regarding current employer) or references to give Utah County Government any private or confidential information concerning my employment record.** Finally, I authorize that copies of this application and attachments may be provided to hiring County departments.

SIGNATURE OF APPLICANT

DATE

VII. COMPLETE THIS SECTION ONLY FOR LAW ENFORCEMENT RELATED POSITIONS

- ☐ YES ☐ NO Are you currently POST (Peace Officer Standards and Training) certified in Utah or another state? If yes, circle all that apply:

Special Functions Specify State: _____

Corrections Specify State: _____

Law Enforcement Officer Specify State: _____

Dispatcher Specify State: _____

- ☐ YES ☐ NO Are you 21 years of age or older? (**Law Enforcement/Corrections only**)

READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS STATEMENT: Having made application for employment with Utah County Government for the position of _____, I hereby authorize Utah County Government to conduct a detailed background investigation and understand that all information pertaining to such application and investigation will be kept confidential and released only to authorized individuals. I understand that should any investigation disclose any misrepresentation, falsification, omission or concealment of material fact, my application may be rejected and my name removed from the eligibility list, and **if already employed, I may be dismissed.** I also understand that certain information or offenses may preclude me from further consideration or result in termination. I hereby release your organization or any other agency involved in releasing this information from any civil or criminal liability arising under the Federal Rights and Privacy Act or other applicable State and County statutes.

SIGNATURE OF APPLICANT

DATE



UTAH COUNTY GOVERNMENT EMPLOYMENT APPLICATION INSTRUCTIONS TO APPLICANTS

1. **Complete an official Utah County employment application for every position for which you are applying.** If more space is needed, attach an addendum using the same application format. Unless requested on the job posting, **RESUMES WILL NOT BE ACCEPTED.** Sign your application and return it with all required attachments to the Personnel Office by 5:00 p.m. (MST) on or before the closing date. **NO POSTMARKS.**
2. **Submit college transcripts and/or diploma with your application to receive college credit - internet printouts and photocopies are acceptable unless otherwise specified.**
3. **Veteran's Preference. Refer to Title 71 UCA 10 as amended for eligibility requirements for veteran's preference.** Persons claiming veteran's preference must submit a photocopy of the veteran's honorable discharge (such as a DD-214) showing the dates of service with each application form. A spouse or unmarried widow or widower of a veteran must also submit a copy of their marriage license as well as the DD-214.

OTHER INFORMATION REGARDING APPLYING FOR A UTAH COUNTY GOVERNMENT POSITION

1. Applicants may be required to undergo drug testing as a condition of employment.
2. False statements, evidence of fraud or deceit in connection with this application will disqualify you from examination or employment, and if discovered after employment are grounds for discharge. This application and all attached documents are official records of Utah County Government and cannot be returned.
3. Your completed application will be used to determine your eligibility for the position for which you are applying.
4. Competitive Career Service positions may require an examination by Utah County Government. Examination can consist of one or a combination of the following: written examination, oral examination, performance examination. If you are applying for a position that requires an examination, you will be notified of the time and place of your examination.
5. Federal law requires supervisors/employers to review documents verifying your identity and eligibility to work in the United States and to complete Form I-9 (Employment Eligibility Verification). You will be required to provide this documentation. Supervisors/employers are in violation of the law if the documents are not reviewed and Form I-9 is not completed.
6. If employed, the Personnel Office will require a copy of your current Social Security Card to ensure County employment forms match the name on the Social Security Card.
7. Your application will not be rejected because of your race, color, national origin, religion, sex, age, or disability, except as legally required.
8. If you are invited to a hiring interview, it is your responsibility to provide the selection official with additional documents as requested.
9. If you desire further information regarding Utah County employment, please refer to www.utahcountyonline.org or contact the Utah County Personnel Office.

UTAH COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

It is the policy of Utah County Government to provide and promote equal opportunity employment, compensation and other terms and conditions of employment without discrimination because of race, color, sex, religion, national origin, age or disability. The County provides reasonable accommodations to the known disabilities of applicants in compliance with the Americans with Disabilities Act.

ADDENDUM FOR ADDITIONAL WORK EXPERIENCE TO THE UTAH COUNTY EMPLOYMENT APPLICATION: List jobs and describe, in the boxes below, all periods of employment such as paid (full or part time), volunteer (full or part time), self employment, and/or military service. Account for your time during any intervals of unemployment other than when attending school. Unless requested on the job posting, RESUMES WILL NOT BE ACCEPTED.

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

EMPLOYER'S NAME AND PHONE NUMBER:	
COMPLETE ADDRESS:	
YOUR TITLE:	FROM _____ TO _____ MO. YR. MO. YR.
<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> VOLUNTEER <input type="checkbox"/> OTHER	HOURS PER WEEK _____ LAST PAY \$ _____ PER _____
SUPERVISOR'S NAME, TITLE, AND PHONE NUMBER:	
DUTIES:	
REASON FOR LEAVING OR SEEKING OTHER EMPLOYMENT:	

APPLICANT DATA RECORD

Utah County Government is an equal opportunity employer and complies with applicable government regulations. It is illegal for any agency or organization to discriminate in hiring based on race, color, sex, religion, national origin, age or disability.

THE INFORMATION REQUESTED ON THIS SHEET IS VOLUNTARY. *This information will assist Utah County Government in applicant tracking, reporting, and other legal requirements. Failure to answer will not subject applicants to disparate treatment.*

We would appreciate your cooperation in filling out this information to help us comply with government regulations. This data will be maintained in a separate, private research file.

Position applied for _____ Posting Number: _____

Date _____

Veteran:

- ☐ Yes
☐ No

Referral Source _____

EQUAL EMPLOYMENT INFORMATION

(Please check applicable information)

Sex: ☐ Female

☐ Male

Age: ☐ Under 40

☐ 40 or Over

Please mark one or more of the following five (5) racial categories which apply to you.

- ☐ **WHITE:** A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF EUROPE, THE MIDDLE EAST, OR NORTH AFRICA
- ☐ **BLACK OR AFRICAN AMERICAN:** A PERSON HAVING ORIGINS IN ANY OF THE BLACK RACIAL GROUPS OF AFRICA
- ☐ **ASIAN:** A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF THE FAR EAST, SOUTHEAST ASIA, OR THE INDIAN SUBCONTINENT INCLUDING, FOR EXAMPLE, CAMBODIA, CHINA, INDIA, JAPAN, KOREA, MALAYSIA, PAKISTAN, THE PHILIPPINE ISLANDS, THAILAND, AND VIETNAM.
- ☐ **AMERICAN INDIAN OR ALASKA NATIVE:** A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF NORTH AND SOUTH AMERICA (INCLUDING CENTRAL AMERICA), AND WHO MAINTAINS TRIBAL AFFILIATION OR COMMUNITY ATTACHMENT.
- ☐ **NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER:** A PERSON HAVING ORIGINS IN ANY OF THE ORIGINAL PEOPLES OF HAWAII, GUAM, SAMOA, OR OTHER PACIFIC ISLANDS.

Please mark the following ethnicity category that applies to you:

- ☐ **HISPANIC OR LATINO:** A PERSON OF MEXICAN, PUERTO RICAN, CUBAN, CENTRAL OR SOUTH AMERICAN, OR OTHER SPANISH CULTURE OR ORIGIN, REGARDLESS OF RACE.
- ☐ **NOT HISPANIC OR LATINO**