



Hamilton County

EMPLOYMENT APPLICATION AN EQUAL OPPORTUNITY EMPLOYER

Employment Information Center Human Resources Department

County Administration Office
138 E. Court Street, Room 707
Cincinnati, Ohio 45202
Phone: (513) 946-4700
Fax: (513) 946-4720

Alms & Doepke Office
222 E. Central Parkway, 3rd fl
Cincinnati, Ohio 45202
Phone: (513) 946-2460
Fax: (513) 946-2251

Juvenile Court Division
800 Broadway, 15th fl
Cincinnati, Ohio 45202
Phone: (513) 946-9239
Fax: (513) 946-9240

Web Address:

www.hamiltoncountyohio.gov/hr

General Information

_____		_____	
Posting Number		Position Applied For	

Last Name			

_____		_____	
First Name		Middle Initial	

_____		_____	
Mailing Address		Apt#	

_____	_____	_____	_____
City	State	Zip	
()	()		
_____		_____	
Home Phone		Business Phone	
()			
_____		_____	
Cell Phone		E-Mail Address	

Complete your response to each question

Are you at least 18 years of age? Yes No

Are you authorized to work in the U.S.? Yes No

If you are an alien authorized by the USCIS to work in the United States, please provide the following:

Current Visa Status: _____

Expiration of employment authorization, if any: _____

Have you ever applied for employment with Hamilton County in the past? Yes No

Have you ever been or are you currently employed by a Hamilton County Department/Agency? Yes No

If yes, list dates and name of department(s) and any other name under which you were known by Hamilton County:

The following information will be used only if it is directly related to the position for which you are applying.

Do you have a valid driver's license? Yes No If Yes, State _____ Year of Expiration _____

Do you have a vehicle you could use in your work? Yes No

Do you currently have vehicle liability insurance? Yes No

How did you learn of this position?

<input type="checkbox"/> County Bulletin Board	<input type="checkbox"/> County Website	<input type="checkbox"/> Other Website	<input type="checkbox"/> Jobs Hotline
<input type="checkbox"/> Newspaper Ad	<input type="checkbox"/> University / Job Fair	<input type="checkbox"/> Other _____	

Education

Use the section below to list your educational achievements including any college, technical or vocational school courses completed.

Did you receive a High School Diploma or GED? YES NO

1) College/University Name and Location	Degree Awarded? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what year? If No, how many years completed?	Type of Degree (Circle One) Associates Bachelors Masters Doctorate	Major: <hr/> No. of Sem Hours: <hr/> No. of Qtr Hours:	
2) College/University Name and Location	Degree Awarded? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what year? If No, how many years completed?	Type of Degree (Circle One) Associates Bachelors Masters Doctorate	Major: <hr/> No. of Sem Hrs: <hr/> No. of Qtr Hrs:	
3) Technical/Vocational School / Location	Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No What Year:	Course of Study	No. of Weeks	No. of Hours
4) Technical/Vocational School / Location	Completed? <input type="checkbox"/> Yes <input type="checkbox"/> No What Year:	Course of Study	No. of Weeks	No. of Hours

Professional Licenses, Certifications and Registrations

Type of License/Certification (e.g. CDL, LSW, Stationary Engineer, etc.)	License/Registration No.	Expiration Date	Licensed to practice in Ohio?
1)			<input type="checkbox"/> Yes <input type="checkbox"/> No
2)			<input type="checkbox"/> Yes <input type="checkbox"/> No

Work History

Give complete information regarding present and former employment, beginning with the most recent. Please include your Military Service and any employment with Hamilton County. A resume may NOT be a substitute for completing this information.

1) Current or Most Recent Employer	Street Address, City, State, Zip	Phone
Your Job Title	Dates of Employment: From: To:	Salary:
Reason for Leaving:		

Duties and Responsibilities (If supervisory, please indicate number and type of positions supervised):

Work History (Cont'd)

2) Employer	Street Address, City, State, Zip	Phone
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Your Job Title	Dates of Employment: From: To:	Salary:	Reason for Leaving:
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Duties and Responsibilities (If supervisory, please indicate number and type of positions supervised):

3) Employer	Street Address, City, State, Zip	Phone
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Your Job Title	Dates of Employment: From: To:	Salary:	Reason for Leaving:
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Duties and Responsibilities (If supervisory, please indicate number and type of positions supervised):

4) Employer	Street Address, City, State, Zip	Phone
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Your Job Title	Dates of Employment: From: To:	Salary:	Reason for Leaving:
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Duties and Responsibilities (If supervisory, please indicate number and type of positions supervised):

Additional Qualifications

Outline briefly any other skills or experience that may be helpful to us in considering your qualifications. Please include volunteer and other community activities:

Please check all of the Microsoft software programs you have used:
 Access Excel SharePoint Designer Outlook PowerPoint Publisher Word

List any other software programs or special machinery and equipment you have experience working with:

References Other than Former Employers and Relatives

1) Name	Phone:	Occupation:
Street Address, City, State and Zip Code:		
2) Name	Phone:	Occupation:
Street Address, City, State and Zip Code:		
3) Name	Phone:	Occupation:
Street Address, City, State and Zip Code:		

I certify all information given by me in this application is true and complete. I authorize Hamilton County to verify the information provided and realize that false information (misrepresentation or omission of information called for) is a basis for disqualification or dismissal. I authorize Hamilton County to contact educational institutions and current and previous employers. I further authorize current and former employers to give you any and all information concerning my previous employment and any pertinent information they may have, and release all parties from all liability for any damages that may result from furnishing such information.

I acknowledge that I will be required to complete a Conviction History Form after I have received a conditional offer of employment for the position for which I have applied, and that a criminal background inquiry (which may include fingerprints) is conducted for all candidates who receive a conditional offer of employment.

Past convictions will not automatically disqualify a candidate for possible employment with the County (with the exception noted below). Each situation will be considered on a case-by-case basis using the following criteria:
1) Nature and Gravity of Offense or Offenses; 2) Time passed since conviction and/or completion of sentence;
3) Nature of job held or sought.

EXCEPTION: Applicants for positions with Hamilton County Job and Family Services are subject to background screening in accordance with the document: Inventory of Criminal Offenses Ruling Out Consideration for Hire. Convictions from this list automatically disqualify a candidate for employment with HCJFS.

I understand that information provided by me on this application may also be compared with information contained in records maintained by Hamilton County concerning myself for the purpose of determining my suitability for employment with Hamilton County.

Sign here: _____ Date: _____

Equal Employment Opportunity

Applicants being considered for all positions shall be treated in a fair and equitable manner based solely upon merit, fitness, and such other occupational qualifications as each individual might possess. Decisions concerning any condition of employment shall not unlawfully discriminate on the basis of race, sex, sexual orientation, gender identity, age, religion, color, national origin, ancestry, disability or any other non-job related criteria.