



Nelson County Dispatch E-911 Center

214 Plaza Drive

Bardstown, KY 40004

Phone: (502)348-3211 Fax: (502)348-4285



APPLICANT INFORMATION			
LAST NAME	FIRST NAME	M.I.	DATE
ADDRESS			APT./UNIT#
CITY	STATE	ZIP	
PHONE	EMAIL		
DATE AVAILABLE	SOCIAL SECURITY #	DOB	DESIRED SALARY
POSITION			
Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		If No, are you authorized to work in the U.S? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you ever worked for this company? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, when?	
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, explain	

EDUCATION			
HIGH SCHOOL		ADDRESS	
FROM	TO	GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	DEGREE
COLLEGE		ADDRESS	
FROM	TO	GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	DEGREE
OTHER		ADDRESS	
FROM	TO	GRADUATE? <input type="checkbox"/> Yes <input type="checkbox"/> No	DEGREE

REFERENCES	
Please list THREE possible references	
FULL NAME	RELATIONSHIP
COMPANY	PHONE
ADDRESS	
FULL NAME	RELATIONSHIP
COMPANY	PHONE
ADDRESS	
FULL NAME	RELATIONSHIP
COMPANY	PHONE
ADDRESS	

PREVIOUS EMPLOYMENT		
COMPANY	PHONE ()	
ADDRESS	SUPERVISOR	
JOB TITLE	STARTING SALARY \$	ENDING SALARY \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
COMPANY	PHONE ()	
ADDRESS	SUPERVISOR	
JOB TITLE	STARTING SALARY \$	ENDING SALARY \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		
COMPANY	PHONE ()	
ADDRESS	SUPERVISOR	
JOB TITLE	STARTING SALARY \$	ENDING SALARY \$
Responsibilities		
From	To	Reason for leaving
May we contact your previous supervisor for a reference? <input type="checkbox"/> Yes <input type="checkbox"/> No		

MILITARY SERVICE		
Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

DISCLAIMER AND SIGNATURE	
<p>I certify that my answers are true and complete to the best of my knowledge.</p> <p>I authorize investigation of all statements contained in this employment application and additional job-related background investigation may be necessary in arriving at an employment decision.</p> <p>If this application leads to employment, I understand that false or misleading information in application or interview may result in my release.</p> <p>I understand that neither this document nor any verbal promises made by employer or representative employee may be constituted as an employment contract.</p> <p>I understand and acknowledge that, unless otherwise defined by law, policies and procedures or rules and regulations, any employment relationship with this organization is of an "at-will" nature, which means that either the employee or employer may terminate the employment relationship at any time, with or without cause or advance notice.</p> <p>I understand that this application is the property of The Nelson County Central Dispatch Center. This application must be signed and dated below before receiving consideration for employment.</p>	
Signature	Date