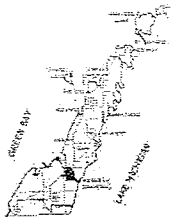
Check one: Registered Nurse ___

Licensed Practical Nurse ___



DOOR COUNTY APPLICATION FOR EMPLOYMENT

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.

Deadline: Friday, September 11, 2009 4:30 p.m.

MAIL APPLICATION MATERIALS TO:

Door County Human Resources Dept

421 Nebraska Street
Sturgeon Bay, WI 54235

Phone: (920) 746-2305

Fax: (920) 746-2538

e-mail: hr@co.door.wi.us

Door County reserves the right to test all applicants for job-related skills. For certain positions, a pre-employment physical examination and drug testing may be required.

Thank you for your interest in employment with Door County. Please read the following instructions carefully:

- This application is to be filled out by the applicant only. If you are physically unable to complete this form, or need other assistance in the hiring process, reasonable accommodations may be requested.
- Incomplete or illegible applications will not be considered. Résumés will be accepted as a supplement to the application form, but will not substitute for it.
- If more space is needed, please indicate this on the application form and attach the additional paper to the application.

PERSONAL INFORMATION

Position Applied For:	Department:	Date Available:	
LTE RN & LPN Staffing Pool	Public Health		
Last Name:	**First Name:**	**Middle Name:**	
Street Address:	**City:**	**State:**	**ZIP:**

Home Phone:	Work Phone:	May we contact you at work? Yes No	What Hours?

E-Mail Address:	Type of Employment Acceptable: (check all that apply) Full-Time Part-Time Seasonal Casual Intern LTE

Are you at least 18 years of age? *(Employment may be subject to verification that you meet state and federal minimum age requirements. Employees under 18 shall have a work permit.)*	Yes	No
Are you a United States citizen, or do you have papers from the U.S. government permitting you to work? *(Verification will be required at the time of employment.)*	Yes	No
Are you able to perform all of the duties listed in the position description, with or without reasonable accommodation?	Yes	No
Have you ever been convicted of a felony? *(If the answer is "yes", please explain at the end of this application form. A "yes" answer does not necessarily disqualify an applicant.)*	Yes	No

WORK HISTORY – PART A

A "yes" answer to any of the following questions does not necessarily disqualify an applicant from the selection process. If you answer "yes" to any of the following questions, please provide an explanation at the end of this application form.

1. Have you ever been suspended, terminated, discharged or resigned to avoid being discharged?	Yes	No
2. Have you ever been disciplined for attendance problems in your current or previous employment?	Yes	No
3. Are there any gaps in employment in excess of thirty (30) days?	Yes	No
4. Have you ever been employed by Door County?	Yes	No

EDUCATION & TRAINING

High School:

Highest Level Completed:	Name & Location of High School:	Graduated?
9 10 11 12 [GED/HSED]		Yes No

Education & Training Beyond High School:

Name & Location of Institution:	Dates From:	Dates To:	Major Field of Study:	GPA	Degree Conferred & Year:

Relevant coursework:

Additional skills and/or training:

Professional licensures/certifications & Expiration Dates:

DRIVER'S LICENSE

Please refer to the position description for the position for which you are applying. If business travel and/or driver's licensing is required, please complete this section.

Do you have access to an automobile?		Yes No
Do you have a valid Wisconsin driver's license?	DL#	Yes No
If the position requires, do you have a valid Wisconsin Commercial Driver's license (CDL)? If yes, please list endorsements:		Yes No
Do you have, or can you make arrangements to obtain, insurance coverage meeting the County's minimum liability insurance requirements on your personal vehicle? ($100,000 per person; $300,000 per accident bodily injury; $50,000 per accident property damage; or $300,000 combined single limit)		Yes No
List any moving violations within the previous five (5) years:		

PROFESSIONAL REFERENCES

Please provide us with four (4) references that would be able to describe your work abilities, qualifications, skills, and/or educational background. Please do not submit names of relatives, spouses, or significant others.

Name	Telephone #	Occupation	Nature of Relationship

WORK HISTORY – PART B

Please complete this section in its entirety. Give a complete record of any employment, self-employment, military service or volunteer experience you have had in the past 10 years. Please include positions beyond the 10 year period if they are related to the position for which you are applying. Start at the top with your present or most recent job. Indicate any change in job title under the same employer as a separate position. You may attach your resume as a supplement to the information you provide in the application. Please note that it is the policy of Door County to contact an applicant's current employer only after that applicant has been deemed a finalist for a position.

Employer Name:		Position Title:		Type of Business:	
Address and phone of Business (Street, City, ZIP, telephone & fax #):		Reason for Leaving:		Name, Title & Phone of Supervisor:	
Employment Dates: From:	To:	Start Salary:	Ending Salary:	Hours per Week:	May we contact, prior to an offer of employment? Yes No
Description of Duties:					

Employer Name:		Position Title:		Type of Business:	
Address and phone of Business (Street, City, ZIP, telephone & fax#)		Reason for Leaving:		Name, Title & Phone of Supervisor:	
Employment Dates: From:	To:	Start Salary:	Ending Salary:	Hours per Week:	Is this employer still in business? Yes No
Description of Duties:					

Employer Name:		Position Title:		Type of Business:	
Address and phone of Business (Street, City, ZIP, telephone & fax#)		Reason for Leaving:		Name, Title & Phone of Supervisor:	
Employment Dates: From:	To:	Start Salary:	Ending Salary:	Hours per Week:	Is this employer still in business? Yes No
Description of Duties:					

(For additional employers, please use a separate piece of paper or make a copy of this page)

EXPLANATION(S) / SUMMARY INFORMATION

REFERRAL SOURCE (PLEASE PROVIDE DETAIL WHEN POSSIBLE)

Newspaper:	Employee:
Employment Agency:	Web Site:
Bulletin Board:	Professional Journal:
Walk-in:	Job Service:
Other:	

In order for your application to be considered, you must complete the Employment Application Affidavit / Information Release.

DOOR COUNTY PERSONNEL DEPARTMENT USE ONLY

	Date Received:

EMPLOYMENT APPLICATION AFFIDAVIT / INFORMATION RELEASE

I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that any misstatements, false information, or omissions of material fact herein subjects me to disqualification or dismissal. I further understand that my classification as a regular employee depends upon successfully performing work assigned to me during a probationary period, where applicable. I also understand that regular attendance is required of me as a condition of continued employment.

I understand and agree that all information furnished in this application may be verified by Door County. I also understand that any offer of employment is conditional subject to a satisfactory check of references and satisfactory results of a background check, drug screen when required, and any other required examinations.

I understand that Door County may conduct a check on my background to verify the information I have furnished in my application for employment, which may include, but not be limited to, information from previous employers, references, school records, driving records, and any criminal records.

I hereby voluntarily and knowingly authorize and request any current or former employer, educational institution, law enforcement agency, or other persons or organizations having personal knowledge about me to furnish Door County with any and all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability or responsibility all persons, companies and corporations supplying such information. Copies of this document will be considered as valid as an original thereof.

Name (Printed or Typed): **Signature:** **Date:**

OPEN RECORDS DISCLOSURE (OPTIONAL)

This section is optional: Under section 19.36 (7) of the Wisconsin Statutes, the names of "final candidates" must be open to public inspection. The statute also provides that if an applicant does not want his/her name revealed prior to being a "final candidate" they can do so by making a request in writing.

Accordingly, I hereby request that my employment application and all related references and documents remain confidential to the extent allowed by Wisconsin Statutes.

Name (Printed or Typed): **Signature:** **Date:**

THANK YOU FOR COMPLETING THIS APPLICATION AND FOR YOUR INTEREST IN EMPLOYMENT WITH DOOR COUNTY.

DOOR COUNTY BACKGROUND CHECK & EQUAL EMPLOYMENT OPPORTUNITY INFORMATION DISCLOSURE FORM

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.

The following information is needed for the following purposes:

- To complete various government reports and implement equal employment opportunity and affirmative actions programs.
- To monitor and prevent discrimination on the basis of race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.
- To facilitate and conduct the necessary background checks for pre-employment screening. These may include, but are not limited to the following: caregiver background checks; criminal records checks; driver's licensing checks; credential and educational verifications; and other necessary background investigations.

The information furnished on this form will not and legally cannot be used adversely against an applicant for employment, except that age, sex, and physical or mental ability may be considered when relevant to the position for which you are applying. This document will not be kept with the employment application, and will not be shared with those individuals involved in the interview process. It shall be maintained as a confidential record of the Personnel Department.

Please Supply The Following Information		
Last Name:	**First Name:**	**Middle Name**
Position Applied For:	**Date of Birth:**	**Are you 40 years of age or older?** Yes No
Maiden Name (If Applicable):	**Social Security Number:**	**Sex:** Male / Female

Race: *(Please Check One)*

	American Indian/Native American *(including Alaskan Natives)*		African American or African origin
	Asian		Hispanic/Latino
	White not of Hispanic origin		Native Hawaiian or Pacific Islander
	Other		

Disability:

The Americans with Disabilities Act (ADA) defines an individual with a disability as "one who has a physical or mental impairment that substantially limits one or more major life activities [such as hearing, seeing, speaking, breathing, performing manual tasks, walking, caring for oneself, learning, thinking or working], has a record of such an impairment, or who is regarded as having such an impairment." *Based on this definition, are you an individual with a disability?* Yes No

The completion of the "Door County Background Check & Equal Employment Opportunity Information Disclosure Form" is voluntary, and there will be no adverse consequences for not completing this form.