



## VAN BUREN COUNTY EMPLOYMENT APPLICATION

Human Resources Address  
219 E Paw Paw Street - Suite 201, Paw Paw, MI 49079  
Website: [www.vanburencountymi.gov](http://www.vanburencountymi.gov)

Telephone No.  
(269) 657-8230  
Email: [HR@vanburencountymi.gov](mailto:HR@vanburencountymi.gov)

Van Buren County is an Equal Opportunity Employer. We consider applications for all positions without regard to race, color, sex, age, religion, national origin, marital status, a person's political affiliation, sexual orientation or gender identity, height, weight, disability, citizenship status, genetic information or any other legally protected status.

### Please Print or Type:

Date of Application: \_\_\_\_\_ Position You are Applying for: \_\_\_\_\_

First Name		Last Name	
List any other names you may have employment records under			
Address			
City		State	Zip
Telephone No.	Alternate Telephone No.	Email:	

Date you are available to start: \_\_\_\_/\_\_\_\_/\_\_\_\_ Rate of pay Expected: \$ \_\_\_\_\_

Are you 18 years old or older? ..... ☐ Yes ☐ No

Do you need full-time employment? ..... ☐ Yes ☐ No

Will you consider part-time? ..... ☐ Yes ☐ No

Will you consider temporary? ..... ☐ Yes ☐ No

Are you authorized to work in the United States? ..... ☐ Yes ☐ No

Have you ever been employed by Van Buren County? ..... ☐ Yes ☐ No

If yes, when and where: \_\_\_\_\_

List any relatives working for Van Buren County in the department(s) for which you are applying: \_\_\_\_\_

Have you ever been suspended or discharged from a former employer? ..... ☐ Yes ☐ No

If Yes, please explain: \_\_\_\_\_

What source referred you to Van Buren County? ☐ County Employee ☐ Newspaper ☐ School ☐ Website  
☐ Unemployment Office ☐ Employment Bulletin ☐ Other: \_\_\_\_\_

**Driver's License Information**

Do you have a valid Michigan Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No	Driver's License Number:	State Issued	Expiration Date:	Endorsements (CDL)
--	--------------------------	--------------	------------------	--------------------

**Veteran-Friendly Employer**

Van Buren County is committed to ensuring honorably discharged members of the armed forces of the United States are provided preference in public employment consistent with Michigan Public Act 205 of 1897, as amended. If you meet the definition of a "veteran" provided by MCL 35.61, please indicate below:

Please check if applicable:

- ☐ I am an individual who served in the United States Armed Forces, including the reserve components and was discharged or released under conditions other than dishonorable.
- ☐ I am currently a guard or reserve member.

**Criminal History**

Have you ever been convicted of a felony? ☐ Yes ☐ No

If yes, explain:

Criminal background checks may be conducted on prospective employees. New employees may not be added to the payroll until verification is received through primary source verification.

**Skills**

Please list any skills, abilities, interests, etc. which you feel could be an asset (types of business machines, computer applications, volunteer work, etc.):

**Education**

High School Name/Location	Dates Attended to	Area of Specialization	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No
College Name/Location	Dates Attended to	Area of Specialization	Degree <input type="checkbox"/> Yes <input type="checkbox"/> No
Other	Dates Attended to	Area of Specialization	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No
Graduate School	Dates Attended to	Area of Specialization	Graduated <input type="checkbox"/> Yes <input type="checkbox"/> No

Other formal education or experience, including but not limited to military services, which you feel is relevant to the position for which you are applying.

Licensures:

**Work Experience**

List all jobs you have held and periods of unemployment in the past ten (10) years. Put your present or most recent job first. If additional space is required, please attach sheets as necessary. Be sure to sign and date attached sheets.

From / to /	Position title:
Name and Address of Employer:	Your Duties:
Employer Telephone Number:	
Name of Supervisor:	Reason for Leaving:

From       /       to       /	Position title:
Name and Address of Employer:	Your Duties:
Employer Telephone Number:	
Name of Supervisor:	Reason for Leaving:

From       /       to       /	Position title:
Name and Address of Employer:	Your Duties:
Employer Telephone Number:	
Name of Supervisor:	Reason for Leaving:

From       /       to       /	Position title:
Name and Address of Employer:	Your Duties:
Employer Telephone Number:	
Name of Supervisor:	Reason for Leaving:

**References** (Please list 3 professional references)

Full Name:	Relationship
Company:	
Email:	Phone:

Full Name:	Relationship
Company:	
Email:	Phone:

Full Name:	Relationship
Company:	
Email:	Phone:

**Disclaimer and Signature**

Medical examinations, in accordance with Americans with Disabilities Act, Van Buren County may require applicants to undergo a medical examination, including drug testing, after an offer of employment has been made and prior to the commencement of employment duties, and may condition the offer of employment entrance examination.

If you will be driving a county vehicle or regularly driving your own vehicle on county business, a driving-record check will be required prior to employment.

I represent that the answers and information given by me in this application are true and complete without qualifications. I hereby authorize Van Buren County to verify the same and to make any investigation of my background deemed necessary. I authorize former employers, law enforcement organizations, educational institutions and any other third party to give Van Buren County information they have regarding me without receiving written notice from them.

I understand that Van Buren County has the right to refuse to hire or immediately terminate my employment at any time if it discovers that I have provided incomplete, untrue or misleading answers in this application or any other documents or forms at any time during my employment.

I authorize Van Buren County to use any information in its possession concerning me for any purpose it deems appropriate including disclosure of information to any third party without any notification to me of such disclosure and I release Van Buren County from any liability in connection with such use of disclosure.

---

Signature

---

Date

**Release Statement**

I request and authorize the release of all information regarding my employment to Van Buren County, including but not limited to my performance in such employment, attendance, dates of employment and reason for leaving such employment.

I hereby release you and all individuals or persons connected herewith from all liability for providing this information and waive my right to written notice of the release to Van Buren County and any relevant information that may be contained in my personnel file.

---

Signature

---

Date

**Optional Information**

The following information is valuable for complying with various governmental reporting requirements. This information will not be used as part of the selection process and will not be provided to the hiring department.

Date of Birth: \_\_\_\_\_

Sex: ☐ Male

☐ Female

☐ Caucasian

☐ Asian or Pacific Islander

☐ Hispanic

☐ American Indian

☐ Black

☐ Alaskan Native

☐ Other

☐ Multi-Racial

Today's Date: \_\_\_\_\_