

FAYETTE COUNTY COMMISSION



FAYETTEVILLE, WV

APPLICATION FOR EMPLOYMENT

Please Print or Type

Full Name _____

Home Address _____
Street City County State Zip Code

Telephone # _____

If not a citizen, do you have permission to remain permanently in the U.S.? Yes No

Are you under 18? Yes No

Desired Position _____

EDUCATION

Circle highest grade completed: 0 1 2 3 4 5 6 7 8 9 10 11 12

School	Name and Address	Degree or Certificate
High School	-----	
College	-----	
Business or Vocational Schools	-----	
Additional Training	-----	

(OVER)

WORK HISTORY

Employer and Address

Present & Previous Employers	Dates		Salary	Position Held	Reason for Leaving
	From	To			

May we communicate with your present employer? Yes No

List any other names that may be pertinent to checking your references: _____

PROFESSIONAL REFERENCES (Other than relatives)

NAME

ADDRESS

Have you ever worked for Fayette County under a different name? No Yes (Explain below)

Profession License (Licensing Board, State, Date, Number)

Mail Applications to:

I authorize investigation of all statements contained in this application.

Fayette County Commission
 Post Office Box 307
 Fayetteville, West Virginia 25840

 Applicant's Signature

 Date