

Geauga County Department of Job & Family Services

APPLICATION INFORMATION

Attn: Human Resources, 12480 Ravenwood Drive, P.O. Box 309, Chardon OH 44024

ONLY SOLICITED APPLICATIONS WILL BE ACCEPTED.

Please read the following information before completing our application.

1. There is no guarantee of a job offer or job interview by completing our employment application. Your application will be considered with others who have submitted applications for the same job opportunity, and decisions about interviews will be based on this comparison.
2. This application form must be completely filled out, signed and dated, or you may not be considered for employment. You can choose to print this blank application and complete it manually, or [you can complete it electronically \(preferred\) by following these steps:](#)
 - a. [Download a copy of this blank form to your computer.](#)
 - b. [Complete all editable text fields.](#)
 - c. [Save your completed version of the form.](#)
 - d. [Attach your completed version to an email and send to: \[jobs@geaugajfs.org\]\(mailto:jobs@geaugajfs.org\)](#)
3. All questions must be answered appropriately. The application must be completed in its entirety. Responding with “see resume” or “see attached” or “available upon request” is not acceptable.
4. If the information provided on our application cannot be satisfactorily verified by employment reference checks, your application could be considered incomplete.
5. We do not accept or maintain on file unsolicited applications. Applications are filed according to specific job opportunities.
6. A new application must be completed for any other posted job opportunities.
7. Due to the large number of applications received and the competitive nature of our employment process, specific reasons for employment decisions will not be released.
8. By completing our employment application, you may be subject to the following checks:
 - a. Employment reference check from previous employer(s) and from current employer
 - b. Criminal record check
 - c. Drug screen, alcohol screen, and/or pre-placement physical exam
 - d. Abstract driving record
 - e. Personal references
 - f. Educational degrees
9. The offer of employment may be contingent upon the successful completion of a pre-employment drug screen, alcohol screen, background investigation, criminal record check, valid and acceptable driving record, physical, psychological, and polygraph tests.
10. The Geauga County Department of Job & Family Services, its representatives, members, or agents will contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities, and educational institutions to verify the accuracy of information provided in the application.
11. The information contained in your application for employment may be a public record.

APPLICATION FOR EMPLOYMENT

Return to: GEAUGA COUNTY DEPARTMENT OF JOB & FAMILY SERVICES

Attn: Human Resources, 12480 Ravenwood Drive, P.O. Box 309, Chardon OH 44024

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of this department. We are an equal opportunity employer and do not discriminate on the basis of race, color, religion, sex, age, national origin, disability, military status, ancestry, genetic information or any other similarly protected status.

POSITION & PERSONAL INFORMATION

Please print clearly or type.

Posted Job Opportunity/Position: _____ Date of Application: _____

Full Name: _____

Address: _____ City, State, Zip: _____

Email: _____

Home Phone: _____ Cell Phone: _____ Date Available for Work: _____

Type of employment desired?

Full-time ☐ Part-time ☐ Temporary ☐ Seasonal ☐ Intermittent ☐ Student Help ☐

Please specify hours you are available to work: _____

Are you legally eligible for employment in the United States? Yes ☐ No ☐

If under the age of 18, can you furnish a work permit? Yes ☐ No ☐

Do you hold a valid driver's license (if driving is an essential job function)? Yes ☐ No ☐

Have you ever been employed by Geauga County? Yes ☐ No ☐

Please specify when and by which department: _____

Are you able to meet the attendance requirements of this position? Yes ☐ No ☐

Are you able to work overtime if necessary? Yes ☐ No ☐

Can you travel if the job requires it? Yes ☐ No ☐

Have you been provided with a written job description for the position for which you have applied? Yes ☐ No ☐

Are you capable of performing in a reasonable manner, with or without reasonable accommodation, the essential duties, responsibilities, and functions of the job for which you've applied? Yes ☐ No ☐

Is there any information we would need about your name, or use of another name, for us to be able to check your work record? Yes ☐ No ☐

Please specify if applicable: _____

How were you referred to this job opportunity?

Gauga Website ☐ Relative/Friend ☐ Newspaper ☐ School ☐ Walk-in ☐ Gov't Employment Agency ☐

Please specify source if applicable: _____

Please list any relatives or friends who are employed by the county: _____

EDUCATIONAL BACKGROUND

High School	City, State	Diploma, Years Completed	Course of Study
College/University	City, State	Degree, Years Completed	Major
College/University	City, State	Degree, Years Completed	Major
Graduate/Professional School	City, State	Degree, Years Completed	Major

EMPLOYMENT HISTORY, SKILLS, AND QUALIFICATIONS

List your most recent job first. Attach additional pages to list all jobs if necessary. Do not use "see resume" or "see attached" in lieu of completing this application.

Began: _____ Ended: _____

Employer's Name and Address _____ Phone (Include Area Code) _____

Job Title/Position _____ Supervisor _____ Ending Wage/Salary _____

Reason for Leaving: _____

Job Duties: _____

Began: _____ Ended: _____

Employer's Name and Address _____ Phone (Include Area Code) _____

Job Title/Position _____ Supervisor _____ Ending Wage/Salary _____

Reason for Leaving: _____

Job Duties: _____

Began: _____ Ended: _____

Employer's Name and Address _____ Phone (Include Area Code) _____

Job Title/Position _____ Supervisor _____ Ending Wage/Salary _____

Reason for Leaving: _____

Job Duties: _____

Please explain any gaps in employment:

Describe briefly the experience, skills, training, and other factors that qualify you for the position for which you are applying:

REFERENCES

3 references must be listed. Do not include relatives.

Name	Occupation, Employer	Phone (Include Area Code)
Address, City, State, and Zip		Years Known

Name	Occupation, Employer	Phone (Include Area Code)
Address, City, State, and Zip		Years Known

Name	Occupation, Employer	Phone (Include Area Code)
Address, City, State, and Zip		Years Known

Please list any additional information which may be helpful to us when considering your qualifications for the position:

APPLICANT CERTIFICATION AND AGREEMENT

Signature required for application to be complete.

I agree and understand that omissions, misstatements, and falsifications will cause forfeiture on my part of all eligibility to any employment with the Geauga County Department of Job & Family Services and may be cause for rejection of this application, removal of my name from eligibility lists, or discharge from service whenever it is discovered. I expressly authorize the Geauga County Department of Job & Family Services, its representatives, members or agents the right to investigate and verify any information obtained through the application process. I authorize all individuals, schools, and firms named therein to provide any information requested about me, and I release them from all liability for damage in providing relevant, job-related information that will assist in this process.

I recognize that an offer of employment may be contingent upon successful completion of a pre-employment drug screen, alcohol screen, background investigation, criminal record check, valid and acceptable driving record, physical, psychological, and polygraph tests. I understand that all conditions of employment including, but not limited to, hours, benefits, and salary are subject to change by the Geauga County Department of Job & Family Services at any time. I understand that no representative of the Geauga County Department of Job & Family Services is authorized to make any assurances to the contrary and that no implied, oral, or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the Appointing Authority.

I understand that a new application must be completed for any future job postings or employment opportunities.

I certify that all information I have provided in order to apply for and obtain employment with the Geauga County Department of Job & Family Services is true, complete, and correct. *(Typing your name on the signature line below is equivalent to a hand signature.)*

Applicant Signature (Required)

Date Signed

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Please continue to next page to
provide voluntary information

Geauga County Department of Job & Family Services
AFFIRMATIVE ACTION VOLUNTARY INFORMATION

Completion of this form is voluntary. Not for interview purposes. Filed separately from application.

We consider all applicants for positions without regard to race, color, religion, sex, national origin, age, disability, military status, ancestry, genetic information, or other similarly protected status.

In an effort to comply with requirements regarding government recordkeeping, reporting and other legal obligations which may apply, we invite you to complete this applicant data survey. Providing this information is strictly voluntary. Your cooperation is appreciated.

Position(s) applied for: _____ Date: _____

Please check referral source:

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> County Website | <input type="checkbox"/> Newspaper | <input type="checkbox"/> Walk in/Post in lobby |
| <input type="checkbox"/> Relative/Friend | <input type="checkbox"/> School | <input type="checkbox"/> Employee |
| <input type="checkbox"/> Government Employment Agency | <input type="checkbox"/> Other: _____ | |

Applicant Information:

☐ Male ☐ Female

Disabled?

☐ Yes ☐ No

Veteran:

- ☐ No ☐ Yes (Please specify below)
- ☐ Vietnam Veteran ☐ Special Disabled Veteran ☐ Other Eligible Veteran

Please check one of the following Equal Opportunity Identification Groups:

- ☐ Hispanic or Latino
- ☐ White (not Hispanic or Latino)
- ☐ Black or African American (not Hispanic or Latino)
- ☐ American Indian/Alaskan Native (not Hispanic or Latino)
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Asian (not Hispanic or Latino)
- ☐ Two or more races (not Hispanic or Latino) – all persons who identify with more than one of the above

FOR ADMINISTRATIVE USE ONLY – OCRC Job Classifications (EEO-4 Report Local Government)

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> Officials/Administrators | <input type="checkbox"/> Professional | <input type="checkbox"/> Technicians | <input type="checkbox"/> Administrative Support |
| <input type="checkbox"/> Protective Service | <input type="checkbox"/> Para Professional | <input type="checkbox"/> Skilled Craft | <input type="checkbox"/> Service/Maintenance |

Completed by: _____

Date: _____