

WEBER COUNTY EMPLOYMENT APPLICATION

WEBER COUNTY IS AN EQUAL EMPLOYMENT OPPORTUNITY EMPLOYER

2380 WASHINGTON BLVD., SUITE 340 OGDEN, UT. 84401 (801)399-8623

1. Position applied for:
Have you read the job announcement and description for the position applied for?
Are you able and willing to perform all the essential functions of the position for which you are applying? 🗌 Yes 🗌 No
2. Name:
Address: Telephone Number :
3. If you have ever been employed by Weber County, fill in the following information:
Department: Position Title: Dates:
4. Are you related to anyone presently employed by Weber County? 🗌 No 👘 Yes If yes, Who:
5. Type of appointment you will accept: Full Time Part Time Temporary Night Shifts Rotating Shifts (Including Weekends) Summer Only
Some positions require rotating shifts including night shifts and weekends up to three months in duration.
6. Weber County requires all new employees to take a drug test prior to reporting to work. Are you willing to be drug tested? Yes No
7. What is the lowest staring salary you will accept:
8. from what source did you learn of this position:
9. Have you ever been convicted of violating any law other than a minor traffic violation? 🛛 Yes 🗌 No
(If yes, explain fully on another sheet of paper. A conviction will only be considered as it relates to the job being sought.)
10. If required for the position for which you are applying, do you have a valid Utah driver's license? 🗌 Yes 🗌 No
11. Are you legally able to work in the United States? 🔲 Yes 🗌 No
(Proof will be required upon hire.)
12. High School Graduate? 🗌 Yes 🗌 No
If no, please circle highest year completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED? Yes No

EDUCATION

(Photocopies of official transcripts and certifications must be submitted if you claim education beyond high school.)

	Da	ites			Type of	Month &
College or University	From	То	Major	Minor	Degree	Year of Degree

	Da	tes		Number of	Type of	Month & Year
Vocational or Technical School	From	То	Subject	Hours	Certificate	Completed

Professional or Trade License, Certificates or Registrations:

Туре:	State:	Number:
(Engineer, POST, Nurse etc.)		
If qualified, fill in the following:		
Net typing speed per minute:	Ten ke	ey speed:
Other office machines you can oper	rate:	
13. If you request veterans preferer	nce check here 🔲	(You must attach a FORM DD214)
EXPERIENCE		
(List most recent job first) Atta	ach additional shee	ts if necessary, using the same format
Company Name:		Supervisor's Name/Phone:
Company's Address:		_ Job Title:
Dates From: To:		Starting Wage: Ending Wage:
Duties:		

Reason for Leaving: _____

Company Name:		Supervisor's Name/Phone:			
Company's Address:		Job Title:			
Dates From: To	Starting Wage: Ending Wage:				
Duties:					
Reason for Leaving:					
Company Name:		Superviso	r's Name/Phone:		
Company's Address:		Job Title:			
Dates From: To	:	Starting W	/age:	_Ending \	Nage:
Duties:					
Reason for Leaving:					
14. Summarize any special skills	and qualifications acqui	red from p	revious employment	or other	experience:
15.Have you ever been known b	y any other name(s) tha	it we might	t need to check your	work refe	rences? 🗌 Yes
No If yes, please list:					
You may contact my present or p REFRENCES	oast employers: 🗌 Yes	No			
Name:	Address:		Telephone:		Years Known:
I hereby authorize the Weber County HR Office, or the hirin, arriving at an employment decision concerning my applicati					

arriving at an employment decision concerning my application employment. I release Weber County of any liability for the use of this information in considering and reviewing my application of employment. I hereby certify that all above statements made in this application are true, and I understand and agree that any false statement of material fact herein may cause forfeiture of all my rights of employment. I hereby authorize any previous or current employer to give or release to Weber County HR or the hiring department or it's agent any and all information in either written or verbal form which relates to my ability to perform duties of the position for which I am applying. I release any previous or current employer for any or all information given to the Weber County HR Office or the hiring department or its agent in considering my application and reviewing my application for the position applied for. I understand that I am required to abide by all rules and regulations of Weber County Corporation.

Signature: ____

– Date: –

Return To: Weber County HR Department 2380 Washington Blvd. , Suite 340 Ogden, UTAH 84401 (801)399-8623

IMPORTANT INFORMATION: You must submit a complete application for each position. Failure to submit all necessary information by 5:00 p.m. on the closing date may disqualify you from consideration for appointment. The education and experience sections will be used to determine whether you meet the minimum qualifications for the position for which you are applying. You will not be given credit for education which you do not have documented on the application. You may not be given a personal interview, so be sure to submit all previous related work history and formal training. If you wish to elaborate on your work experience, attach a supplemental sheet or resume to the application. Include military service if applicable. The evaluation method may include combination of the following: oral examination, written examination, performance test or rating of education and/or experience. If a rating of education and/or experience, it will be based only on your application. Be certain it is complete. If a written or oral examination is the evaluation method, you will be notified by telephone of the date, time and place of the exam. You may telephone the HR Office to determine where you placed on the register or if you did not qualify.

WEBER COUNTY AFFIRMATIVE ACTION INFORMATION

To better help the Weber County Corporation satisfy Merit System principles and meet our Equal Employment Opportunity Affirmative Action Program goals, we would appreciate your responses to the information below. *The information requested on this sheet is strictly voluntary.* This information will assist the County in applicant tracking, reporting, and other legal requirements. Failure to answer will not impact our consideration of your application. *This information is used for statistical purposes only* and will be used to assist Weber County in complying with federal reporting requirements.

Position Applie	d For:			———— Тс	oday's Date: ————————————————————————————————————	
Name: ———					_	
Date of Birth: -				Male:	Female:	
Marital Status:		Single Marri	ed	_ Divorced	Widowed	
Number of Chil	dren _					
Race		White				
		Black				
		Hispanic				
		Asian or Pacific Islander				
		American Indian or Alasl	kan Native			
I certify the abo	ove sta	itements are complete ar	nd accurate			
Signature:					Date:	_

Weber County is An Equal Employment Opportunity Employer

Return To: Weber County HR Department 2380 Washington Blvd. Suite 340 Ogden, UT. 84401 (801)399-8623

WEBER COUNTY, UTAH

"EMPLOYEE RELATIONS NETWORK MEMBER"

APPLICANT CERTIFICATION AND AUTHORIZATION

I hereby give EMPLOYEE RELATIONS NETWORK MEMBER and EMPLOYEE RELATIONS, INC. (hereinafter collectively referred to as "you") the right to conduct an investigation of my background. I understand that the Investigation may include inquiry into my past employment, education, and activities, including, but not limited to, credit, criminal background information and driving record, and I release from all liability all persons, companies, schools, and corporations supplying such information. I indemnify you against any liability which might result from making such investigation. Additionally, I agree that you may obtain an investigative consumer report or other information regarding me and may consult certain files which are available. I understand that EMPLOYEE RELATIONS, INC. will retain the results of this investigation, be disclosed in subsequent investigations to other Members of the EMPLOYEE RELATIONS NETWORK. I understand that any false answers, statements, implications, or derogatory information supplied in any application for employment, implication based on information supplied in any application for other required documents, may be considered sufficient cause for denial of employment or discharge.

I understand that you may contact my previous employers and I authorize those employers to disclose to you all records pertinent to my employment with them. In addition to authorizing the release of any information regarding my employment, I hereby fully waive any rights or claims I have or may have against my former employers, their agents, employees, and representatives, as well as other individuals who release information to you, and release them from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me.

I have read and understand the Summary of Your Rights Under the Fair Credit Reporting Act and the Applicant Notification, a copy of which I acknowledge receiving, advising me that a comprehensive background investigation may be conducted, which may include inquiry into past employment, education, and activities, including but not limited to, credit, criminal background information and my driving record.

APPLICANT NAME (PRINT):	·· ···································
PHONE:	Date of Birth:
EMAIL:	DATE OF BIRTH INFORMATION IS COLLECTED FOR THE SOLE PURPOSE OF EXPEDITING YOUR BACKGROUND INVESTIGATION; IT IS NOT A FACTOR CONSIDERED IN THE EVALUATION OF YOUR APPLICATION FOR EMPLOYMENT.
ADDRESS:	·
CITY:	STATE: ZIP:
SOCIAL SECURITY NUMBER:	
DRIVER'S LICENSE NUMBER:	STATE: EXPIRATION:///
SIGNATURE:	DATE:

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A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to <u>www.ftc.gov/credit</u> or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

- You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer
 report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and
 must give you the name, address, and phone number of the agency that provided the information.
- You have the right to know what is in your file. You may request and obtain all the information about you in files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - A person has taken adverse action against you because of information in your credit report
 - You are the victim of identity theft and place a fraud alert in your file
 - Your file contains inaccurate information as a result of fraud
 - You are on public assistance
 - You are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005, all consumers will be entitled to one free disclosure every 12 months, upon request, from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See <u>www.ftc.gov/credit</u> for additional information.

- You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See <u>www.fic.gov/credit</u> for an explanation of dispute procedures.
- Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than ten years old.
- Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need usually
 to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for
 access.
- You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information go to <u>www.fic.gov/credit</u>.
- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

· Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National Banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20561 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration A775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20250 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051

APPLICANT NOTIFICATION

In conjunction with your application for employment with us, we utilize the services of EMPLOYEE RELATIONS, INC. to conduct a background investigation regarding your character, general reputation, personal characteristics, and mode of living. The investigative report may be comprehensive and include inquiry into past employment, education, and activities, including, but not limited to public records, credit history, criminal background information and driving record.

EMPLOYEE RELATIONS, INC. will, to the extent permitted by law, upon request, reasonable notice, and proper identification, provide you with information that was used in generating the report.

EMPLOYEE RELATIONS, INC. can be contacted at:

EMPLOYEE RELATIONS, INC. 20720 VENTURA BOULEVARD, SUITE 200 WOODLAND HILLS, CA 91364 (818) 887-9129 OR BY EMAIL TO: complianceofficer@erelations.com