



**SKILLS**

PLEASE LIST THE KINDS OF OFFICE EQUIPMENT OR CONSTRUCTION EQUIPMENT YOU CAN OPERATE \_\_\_\_\_

NUMBER OF WORDS PER MINUTE \_\_\_\_\_ SHORTHAND \_\_\_\_\_ TYPING \_\_\_\_\_

DO YOU HAVE A VALID DRIVERS LICENSE? YES  NO

**COMPLETE THIS SECTION IF YOU SERVED IN THE U.S. ARMED FORCES**

Describe your duties and any special training _____ _____ _____	Branch of Service _____
	Period of Active Duty (Month & Year) From _____ To _____
	Rank at Discharge _____
	Date of Final Discharge _____

Reserve status: \_\_\_\_\_ Active \_\_\_\_\_ Non-applicable \_\_\_\_\_ Type of discharge \_\_\_\_\_

**EMPLOYMENT HISTORY**

INCLUDE MILITARY HISTORY, PART TIME, TEMPORARY, AND SEASONAL EMPLOYMENT

LIST PRESENT OR LAST EMPLOYER FIRST

1 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
 \_\_\_\_\_  
 SUPERVISOR \_\_\_\_\_  
 SUPERVISOR'S TITLE \_\_\_\_\_  
 TELEPHONE \_\_\_\_\_  
 EMPLOYED FROM \_\_\_\_\_  
 EMPLOYED TO \_\_\_\_\_  
 STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
 ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 \_\_\_\_\_  
 ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

2 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
 \_\_\_\_\_  
 SUPERVISOR \_\_\_\_\_  
 SUPERVISOR'S TITLE \_\_\_\_\_  
 TELEPHONE \_\_\_\_\_  
 EMPLOYED FROM \_\_\_\_\_  
 EMPLOYED TO \_\_\_\_\_  
 STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
 ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
 \_\_\_\_\_  
 ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

3 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
 \_\_\_\_\_

EMPLOYMENT HISTORY  
(CONTINUED)

SUPERVISOR \_\_\_\_\_  
SUPERVISOR'S TITLE \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
EMPLOYED FROM \_\_\_\_\_  
EMPLOYED TO \_\_\_\_\_  
STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

4 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
\_\_\_\_\_  
SUPERVISOR \_\_\_\_\_  
SUPERVISOR'S TITLE \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
EMPLOYED FROM \_\_\_\_\_  
EMPLOYED TO \_\_\_\_\_  
STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

5 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
\_\_\_\_\_  
SUPERVISOR \_\_\_\_\_  
SUPERVISOR'S TITLE \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
EMPLOYED FROM \_\_\_\_\_  
EMPLOYED TO \_\_\_\_\_  
STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

6 EMPLOYER \_\_\_\_\_ YOUR JOB TITLE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ DESCRIBE YOUR WORK \_\_\_\_\_  
\_\_\_\_\_  
SUPERVISOR \_\_\_\_\_  
SUPERVISOR'S TITLE \_\_\_\_\_  
TELEPHONE \_\_\_\_\_  
EMPLOYED FROM \_\_\_\_\_  
EMPLOYED TO \_\_\_\_\_  
STARTING SALARY \_\_\_\_\_ PER \_\_\_\_\_  
ENDING SALARY \_\_\_\_\_ PER \_\_\_\_\_ REASON FOR LEAVING \_\_\_\_\_  
ACCOUNT FOR TIME BETWEEN JOBS \_\_\_\_\_

State names of relatives and friends working for us other than your spouse. \_\_\_\_\_

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court?  
 Yes  No If Yes, describe in full. \_\_\_\_\_





**COUNTY OF BEDFORD  
DEPARTMENT OF HUMAN RESOURCES**

**REFERENCE RELEASE**

Please list 3 previous employers or personal references:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Previous/Personal) – Please Circle

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Previous/Personal) – Please Circle

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Previous/Personal) – Please Circle

By signing below, I hereby authorize you to verify my employment record. In consideration of this request, I hereby agree to release you from, and hold you harmless for any, and all claims I might have as a result of the information provided to you.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

NAME (First, Middle, Last) \_\_\_\_\_ Gender Male / Female

MAIDEN NAME (If applicable) \_\_\_\_\_

CURRENT ADDRESS: \_\_\_\_\_ HOW LONG? \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

1<sup>ST</sup> PREVIOUS ADDRESS \_\_\_\_\_ HOW LONG? \_\_\_\_\_

CITY, STATE, ZIP: \_\_\_\_\_

APPLICANT SOCIAL SECURITY NUMBER: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

DRIVER'S LICENSE # AND STATE ISSUED: \_\_\_\_\_

**APPLICANT AUTHORIZATION**

I hereby authorize FirstPoint, Inc. ("FirstPoint") to prepare an INSIGHT report that will include my present and previous employment information including salary as well as work performance. I also authorize FirstPoint to verify my past and present driving records, education records, credit history, and professional credentials. I further authorize FirstPoint to perform a criminal records search.

I understand that FirstPoint does not guarantee the accuracy or timeliness of the information obtained from other sources and that FirstPoint will not be liable for any inaccuracy in the information obtained from other sources that is included in the INSIGHT report.

Further, I authorize my current and former employers, as well as other organizations to provide such information to FirstPoint and I hereby release and hold harmless FirstPoint, my current and former employers, as well as other organizations who have provided information in connection with my INSIGHT report.

**CONSUMER DISCLOSURE**

I understand that a pre-employment consumer report (Insight) may be obtained from the FirstPoint, Inc for employment purposes.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**APPLICANT'S SIGNATURE** **DATE**

***For Office Use Only:***

**Company Name: Bedford County HR Requester: Cheryl Dean/Pam Bohon**

Criminal Records  Motor Vehicle Record  Multi-State Criminal Database

SS number & Name Verification /Address search

Criminal (Where?)(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

Employment (1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_

Education verification \_\_\_\_\_