EMPLOYMENT APPLICATION



Supervisors: Name

Previous Job Date of Hire: Mo/Day/Yr.

Your Position

Fill Out Completely. Type or Print In Ink

DES MOINES COUNTY COMMUNICATIONS	Des Moines County Communications (DESCOM) 1401 W Agency Road Suite 070 West Burlington, Iowa 52655								
			Date	Email Address: If available					
			Position Ap	oplied For:					
Name: Last	First	Middle	:		Social Security No.			Home Phone No.	
Address: No. & Street	City	State Zi	p Code		Message:	Name/Phone	:	Cell Phone No.	
			CATION						
	Cite Specialize Name of School	ed Training Other Th		ucation On R aduated:	leverse Side Yes	☐ No	G.E.D.:	Yes No	
Himb Cabaal									
High School	Address: No. & Street	Ci	ty	State	Zip Code		Vocational Program		
	Name of College		Gr	aduated:	Yes	☐ No	Degree		
College	Address: No. & Street	Ci	ty	State		Zip Code	Major		
	Name of Institution		Gr	aduated:	Yes	☐ No	Degree	or Certificate	
Other Schools	Address: No. & Street	Cì	City Sta		Zip Code		Major/Type of Program		
		EMPLOYM							
		ons Held In Reserve (ecent) Job Firs	t			
Present Job	Name of Employer		Type of business						
Date of Hire: Mo/Day/Yr.	Address: No. & Street	City		State		Zip Code		Company Phone No.	
Your Position	Nature of Duties								
Supervisors: Name	Title		Reas	Reason for Seeking New Employment					
Previous Job	Name of Employer		Туре	e of business					
Date of Hire: Mo/Day/Yr.	Address: No. & Street	City		State	Zi	Zip Code C		y Phone No.	
Your Position	Nature of Duties								

Reason for Seeking New Employment

Zip Code

Company Phone No.

Type of business

State

City

Supervisors: Name Title Reason for Seeking New Employment Continued On Reverse Side

Title

Address: No. & Street

Name of Employer

Nature of Duties

Previous Job	Name of Employer	Type of business									
Date of Hire: Mo/Day/Yr.	Address: No. & Street	City	State	Zip Cod	е	Company Phone No.					
Your Position	Nature of Duties										
Supervisors: Name Title Reason for Seeking New Employment											
Previous Job	Name of Employer		Type of business								
Date of Hire: Mo/Day/Yr.	Address: No. & Street	City	State Zip Code			Company Phone No.					
Your Position	Nature of Duties										
Supervisors: Name Title Reason for Seeking New Employment											
OTHER INFORMATION											
Military	Branch	Rar	nk	Duties)S						
	Discharge: Hon	Below)									
Qualifications											
And Skills		river Commercial Driver L		F 0 1							
Alia Skiiis	Current License: D	cense License Ever Suspended or Rev			ted? Yes No						
		nauffer None	Date:		F	Reason:					
From Consideration of A Colone (con-	No.:	State:									
Ever Convicted of A Crime (exc	cept minor traffic violation	s)? Yes No									
	Offenses:										
List Any Specialized Training, C	Certificates or Achievemen	ts:									
How did you hear about this en											
Do you have any relatives or fr	iends currently employed	by the DESCOM? Yes (List na	mes) No								
Have you reviewed the job des	scription or posting for the	position sought?									
		REFERE (List Th									
Name:		Address:	Address:			Phone:					
Name:		Address:	Address:			Phone:					
Name:		Address:				Phone:					
DESCOM Does Not Discriminate On the Basis of Race, Color, National Origin, Sex, Sexual Orientation, Gender Identity, Religion, Age, or Disability in Employment or the Provision of Services.											
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omissions. I authorize my pemployers, including their r should investigation disclos disqualified from making fu I understand that any em collective bargaining agree employment physical exam strict policy against illegal of illicit activities occurring on	oresent and former emprepresentatives & their seem is their of the	ements made by me on this En ployers to give DESCOM official companies, from all liability fro falsification, I will be dismissed ESCOM. E DESCOM is "employment at v I understand my driving and I's expense following a condition of ployees that can result in immed to be subject to random drug test t are subject to discipline, up to	s any information re m damage for provi I immediately, my ap vill" & I may be term any criminal records anal offer of employr ediate disqualificati sting. I also understa	garding me or ding requeste oplication will ninated for any s may be checo ment. I also ur on or dismissa and the DESCO	r my perfo d informa be rejecte y reason n ked and 1 a nderstand I from em	ormance and release such tion. I understand that ed and I will be ot violative of law (or a lagree to submit to a prelithat the DESCOM has a ployment for any such					
Read the Above Stateme	ent Carefully!	Date		Signature of	Applicant						