

# Shelby County Fiscal Court Employment Application



Dan Ison, County Judge-Executive  
501 Main Street, Shelbyville, Kentucky 40065

Mike Cox, Human Resources Manager  
501 Main Street, Ste. 15, Shelbyville, Kentucky 40065  
Phone:(502) 633-1220 ext. 221

## Shelby County Fiscal Court Employment Application Instructions

***Please read these instructions carefully before submitting your Employment Application. Any misrepresentation in this Application and/or attachments WILL cause your Application to be rejected, your name to be removed from the eligible register and/or subject you to dismissal.***

***This Application must be filled out completely in order to be considered for employment. You may provide a resume, although you must complete this Application. Please print in ink or type and do not leave any blank spaces.***

### GENERAL INFORMATION

- Please read the minimum requirements (and application notes if the position is posted) before applying.
- Apply for positions only if you meet the minimum qualifications for the job. We cannot waive requirements.
- Application materials must be received by the announced deadline.
- Sign and date your Employment Application and submit a copy of your Driver's License and Social Security Card.
- Criminal Background Checks will be run on all Applicants not currently employed with the Shelby County Fiscal Court, as well as those employees with less than six (6) months of service.
- The following information is required for Criminal Background Checks to be run:
  - Social Security Number
  - Birth Date
  - Driver's License Number and the State in which it was issued
  - Address
- Application copies that are too light or damaged (bent, rolled, stained, etc.) are not acceptable.

### EDUCATION AND RELATED INFORMATION

Educational requirements are met only through accredited institutions. The institution(s) must be accredited by an agency recognized by the United States Department of Education. Foreign Degrees must be converted.

Please provide clear copies of any educational certifications or similar documents along with any certificates or diplomas for short courses completed (ex: software, leadership courses, etc.) with submitted Employment Applications. Please also provide copies of transcripts if case specific courses are needed.

If your college diploma does not specify what your major field of study was, please submit a clear copy of an official transcript. Education credits may be awarded, in many cases, only if the specific degree is indicated.

It is best to include all levels of higher education documentation because credit may be given for a specific bachelor's degree that would not be evident on a master's diploma.

Even if you did not complete college it is still beneficial to submit a copy of an official transcript of completed courses because partial credit may be awarded. If you are applying for a position that requires a college degree and you either did not complete college or completed but not in the required field, you must list your major undergraduate subjects and credit hours.

If a position requires a license or certification you must have an up-to-date license/certification (ex: driver's license, CDL, EMT, Paramedic) on file with the Human Resources Department. As you renew your licenses and certifications, please bring in your new documents for us to copy.

### EMPLOYMENT RELATED INFORMATION

Work history information is used to determine whether you qualify for the job for which you are applying. List all periods of employment, beginning with your present or most recent employer. It is especially important that you fill out the beginning and ending dates (month/year) and the average number of hours worked per week for each job listed. If your hours varied, list a range such as "20-40 hours". If you often worked overtime, "40+" is acceptable.

If you held different jobs while working for the same employer (ex: promotions), treat each change as a separate job.

Describe, in detail, your specific duties, beginning with your primary duties. Also include types of software used, specific equipment operated and other such details.

If you cannot fit all the jobs you have held on to this application, attached supplemental sheets.

***"Thank you for your interest in Shelby County Fiscal Court employment"***



Shelby County Fiscal Court  
Application for Employment  
Shelby County Judge Executive's Office  
501 Main Street, Ste. 15 Shelbyville, Kentucky 40065  
Phone (502) 633-1220 / Fax (502) 633-7623  
Web address: <https://shelbycounty.ky.gov>  
EEO/ADA Employer

\*\*\*Please read Employment Application Instructions before completing this form\*\*\*

Date: \_\_\_\_\_

Position Applied for: \_\_\_\_\_ Date you can begin work: \_\_\_\_\_

Please indicate how you learned about this job: \_\_\_\_\_

Check **all** that you are interested in:

- Full Time  
 Part Time

### PERSONAL INFORMATION

\_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

\_\_\_\_\_  
(Address) (City) (State) (Zip)

List any alias names: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone No.: \_\_\_\_\_

Are you authorized to work in the United States? \_\_\_\_\_  
(For non-citizens, a copy of your authorization to work issued by the U.S. Immigration and Naturalization Service must be submitted prior to appointment.)

Have you ever been discharged or forced to resign from any position? \_\_\_\_\_  
If yes, please give employer, date and reason: \_\_\_\_\_

Are you **currently** employed by Shelby County Fiscal Court? \_\_\_\_\_  
If yes, please give Department: \_\_\_\_\_

Are you a **former** employee of Shelby County Fiscal Court? \_\_\_\_\_  
If yes, please give last date(s) of employment: \_\_\_\_\_ Department: \_\_\_\_\_  
Reason for leaving: \_\_\_\_\_

Do you have any relatives employed by Shelby County Fiscal Court? \_\_\_\_\_  
If yes, please list: \_\_\_\_\_

Have you been convicted of a felony or traffic violation in the past five years?  
If yes, please explain: \_\_\_\_\_

(the nature of the offense and when/where it occurred)

\*We are a drug free workplace and you will be required to have a drug test administered.

Do you have a valid Driver's License? \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
Do you have a CDL? \_\_\_\_\_ License ID# \_\_\_\_\_ Class A, B or C: \_\_\_\_\_  
(please list)

### EDUCATION

Did you graduate from high school? \_\_\_\_\_

If no, what is the highest grade completed? \_\_\_\_\_ Did you obtain a GED? \_\_\_\_\_

Name and location of last school attended: \_\_\_\_\_

Did you attend college? \_\_\_\_\_

If yes, where did you attend? \_\_\_\_\_ Did you obtain a degree? \_\_\_\_\_

If yes, what type of a degree? \_\_\_\_\_

Other (Military, Vocational, Technical, etc.) \_\_\_\_\_

Please list name/location of schools, dates attended, courses completed and whether a certificate was received: \_\_\_\_\_

Please list your professional memberships, certificates, designations, honors, awards, fellowships, etc.:

- |          |          |
|----------|----------|
| 1. _____ | 3. _____ |
| 2. _____ | 4. _____ |

### U.S. MILITARY SERVICE

Are you a Veteran? \_\_\_\_\_

List below any and all military service you have had or are presently serving:

Branch: \_\_\_\_\_ Rank and Type of Service: \_\_\_\_\_

Training/Experience Received: \_\_\_\_\_

### SKILLS

Check **all** that apply:

- Typing \_\_\_\_\_ wpm
- Excel
- Word
- Word Perfect

- Power Point
- Outlook
- Other software: \_\_\_\_\_

**EMPLOYMENT HISTORY**

(this section **must** be completed, it cannot be substituted with a resume)

List all experience, in order, starting with your present or most recent position and working backwards. Attach additional sheet(s) as needed.

Employer \_\_\_\_\_ Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Hrs. per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Description of Duties: \_\_\_\_\_  
\_\_\_\_\_  
May we contact this employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Hrs. per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Description of Duties: \_\_\_\_\_  
\_\_\_\_\_  
May we contact this employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

Employer \_\_\_\_\_ Dates of Employment: From: \_\_\_\_\_ To: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Supervisor's Name: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Hrs. per Week: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
Description of Duties: \_\_\_\_\_  
\_\_\_\_\_  
May we contact this employer? \_\_\_\_\_ Yes \_\_\_\_\_ No

USE THIS SPACE FOR ANY SPECIAL QUALIFICATIONS YOU MAY HAVE RELEVANT TO THIS POSITION FOR WHICH YOU ARE APPLYING.

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**REFERENCES**

	NAME	ADDRESS	PHONE NO.
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

**CONDITIONS OF EMPLOYMENT STATEMENT**  
**(ALL APPLICANTS PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING)**

I understand that completion of this Application does not indicate that there are any open positions and does not in any way obligate Shelby County Fiscal Court to hire me or offer me a job. **I further understand that any misrepresentation herein WILL cause my Application to be rejected, my name to be removed from the eligible register and/or subject me to dismissal.** Candidates selected for hire must pass a drug screen (and physical exam when necessary for certain positions) prior to employment. I am aware that the results will be made available to the Human Resources Manager or a duly authorized representative. The Shelby County Fiscal Court is committed to a drug free workplace to protect the safety of workers and the public and will comply with the Federal Drug Free Work Place Act.

Under penalties of perjury, I declare that my answers to the questions on this Application and any necessary examinations and supplements are true and give Shelby County Fiscal Court the right to investigate all information given and to secure additional appropriate information if necessary. I understand that an investigative report may be made from information obtained through personal interviews with others. I understand that this inquiry may include information as to my personal characteristics, employment verification, credential verifications, reference checks, criminal records, motor vehicle records, and appropriateness for employment. In accordance with the law and my understanding of this statement, I authorize my current and former employers to give any information regarding my employment, together with all information regarding me, and hereby release from all liability or responsibility all persons, companies, or corporations furnishing such information in good faith. I also authorize the release of my scholastic ratings to the Shelby County Fiscal Court by schools and other education institutions that I have attended.

I understand that this Application and any attached documentation become a part of the Shelby County Fiscal Court records and will not be returned to me once submitted. I am also aware that my Application is subject to the Kentucky Open Records Law and may be released as a public document.

Shelby County Fiscal Court is an Equal Opportunity Employer.

By my signature, I certify, authorize and acknowledge the above statements.

X _____ Signature	_____ Date
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