

**Juniata County Government**  
**Application for Employment**

Please see [www.juniataco.org](http://www.juniataco.org) for a list of available job opportunities.

Name (Last), (First), (Middle)	Position Applied For:	Date:
Address:	Social Security Number	Telephone Number
City: State:	Zip:	Phone:

Reason for applying for employment with the Juniata County Courthouse \_\_\_\_\_

\_\_\_\_\_

What date would you be available for work? \_\_\_\_\_

Are you prevented from legally becoming employed in the United States? \_\_\_\_\_ Yes \_\_\_\_\_ No

<p>Have you ever been convicted of a felony or misdemeanor (other than a minor traffic violation)?</p> <p>_____ Yes _____ No      If yes, give details.</p> <p>_____</p> <p>_____</p>
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	Name & Address	Course of Study	Years Completed	Diploma
<b>High School:</b>				
<b>Undergraduate College:</b>				
<b>Graduate Professional:</b>				
<b>Other:</b>				

Describe any specialized training, apprenticeship, skills, and extracurricular activities:
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State any additional information you feel may be helpful to us in considering your application:
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**Employment Experience**

Begin with most recent job. Attach any additional sheets if necessary.

Name & Address of Previous Employer	Position Held	From	To	Salary	Supervisor's Name	Phone

Have you ever worked for the Juniata County Courthouse under a different name? \_\_\_\_ Yes \_\_\_\_ No  
 If yes, what name was used?

**Personal References: Do not list relatives.**

Name	Position

Do you have any physical, mental or medical condition(s) which would interfere with your ability to do the job duties for which you have applied, or which may endanger others? \_\_\_\_ Yes \_\_\_\_ No if yes, please explain:

PLEASE READ ALL OF THE FOLLOWING CAREFULLY BEFORE SIGNING. YOUR SIGNATURE INDICATES THAT YOU EXPRESSLY AGREE WITH ALL OF THE FOLLOWING.

I hereby certify that the statements I have given on this application are true and I have not knowingly withheld any circumstance that might, if disclosed, affect my application unfavorably. I understand and agree that if any statements made by me on this application prove to be false or misleading or incomplete, it will prevent me from being hired, and it will be grounds for my immediate dismissal from employment, and I release them from any liability for issuing this information. In consideration for my employment, I hereby agree to comply with all rules, regulations and policies established by the Juniata County Government for its employees, including such new or revised rules, regulations and policies as may be subsequently established.

**Applicant Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

The Juniata County Government is an Equal Opportunity Employer. The Juniata County Government does not discriminate on the basis of race, color, national origin, sexual orientation, age, creed, or handicap.

**Return Application To:**  
**Juniata County Government**  
**PO Box 68, 26 N. Main Street**  
**Mifflintown, PA 17059**  
**Email: Commissioners@juniataco.org**