



Employment Application



ACCOMMODATIONS: The Americans with Disabilities Act of 1990 ensures you the right to employment with the State of Kansas. Arrangements will be made if you have a disability that requires an accommodation for completing an application form, interviewing or any other part of the employment process. It is your responsibility to make your needs known to the Division of Personnel Services 785/296-4278 or the agency to which you are applying.

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Work Experience - List your last three employers *or* last three positions, starting with the most recent. Attach a *Supplement to Employment Application* or other pages if you want to include more positions.

Month & Year	Name/Address of Employer	Reason for Leaving	<input type="checkbox"/> Paid Employment <input type="checkbox"/> Unpaid Experience
From _____			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Number of hours per week _____ Ending Pay \$ _____ per _____
To _____			

Title _____ Duties _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____

Supervisor's Name _____ Supervisor's Phone Number _____

Month & Year	Name/Address of Employer	Reason for Leaving	<input type="checkbox"/> Paid Employment <input type="checkbox"/> Unpaid Experience
From _____			<input type="checkbox"/> Full-time <input type="checkbox"/> Part-time <input type="checkbox"/> Number of hours per week _____ Ending Pay \$ _____ per _____
To _____			

Title _____ Duties _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____

Supervisor's Name _____ Supervisor's Phone Number _____

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To _____			

Title _____ Duties _____

List Computer Skills used in this Position _____

Largest Number of People Supervised _____

Supervisor's Name _____ Supervisor's Phone Number _____

Other Employment: (Account for all employment in at least the last 10 years)

Name and Address of Company	Position Held	Employment Dates

Other Related Experiences: Please describe here any additional experiences or professional certifications, honors, knowledge or technical or special skills mentioned elsewhere (i.e., equipment or machines operated, etc.)

Computer Skills (name software and hardware): _____

Supplemental Work Experience: _____

References: Include supervisors and persons **we may contact** to verify your work performance and qualifications.

Name: _____	Occupation: _____	Email Address: _____
Previous supervisor? Yes ____ No ____	Organization: _____	Phone: _____
Name: _____	Occupation: _____	Email Address: _____
Previous supervisor? Yes ____ No ____	Organization: _____	Phone: _____
Name: _____	Occupation: _____	Email Address: _____
Previous supervisor? Yes ____ No ____	Organization: _____	Phone: _____

Affirmation

I affirm that the facts set forth above in my application for employment are true, correct and complete to the best of my knowledge. I understand that I may be required to submit information not requested on this application form; that the employing agency may verify any information provided by me in the employment process; and that incomplete information or omission of my signature is just cause for rejection of my application.

I understand that the Careers system and the Recruiter will send correspondence, to the e-mail address I provided (if applicable), regarding specific information about this application and I understand it is my responsibility to check my e-mail regularly during the recruitment process.

I understand and agree that, if hired, my employment would be contingent upon conditions specific to the position for which I am applying. I also understand that any omission of information, or erroneous information provided in any part of the employment process, would be sufficient cause for discharge. I agree that the employing agency may, at its sole discretion, provide compensatory time off in lieu of overtime pay if I were employed in a nonexempt position and if there were no existing agreement to the contrary.

Signature of Applicant

Date

Return this application form to the agency which has the vacancy for which you are applying; *do not return this form to any other location*. For general information about the State of Kansas employment process, phone Office of Personnel Services (Department of Administration, 900 S.W. Jackson, Room 400-N, Topeka, Kansas 66612) at 785-296-4278.

THE STATE OF KANSAS IS AN EQUAL OPPORTUNITY EMPLOYER