

CONTINUATION OF EMPLOYMENT WORK HISTORY

(Use this additional space to list additional jobs and complete work history)

Class Title: _____ Class Code: _____
 Name: _____

PREVIOUS EMPLOYER:		POSITION HELD:	
STREET:	CITY:	STATE:	ZIP:
SUPERVISOR & TITLE:		May we Contact? <input type="checkbox"/> Yes <input type="checkbox"/> No PHONE: ()	
Number of hours worked per week:		Type of Business:	
FROM (mo/yr):	TO (mo/yr):	Reason for leaving:	
Number of positions you supervised:	Supervision Responsibilities: <input type="checkbox"/> Hire <input type="checkbox"/> Evaluate <input type="checkbox"/> Discipline (DESCRIBE BELOW)		
TASKS PERFORMED (Please relate tasks performed to the position for which you are applying):			

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OVER

PIMA COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

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I hereby certify that the information contained is true, correct, and complete to the best of my knowledge and belief. I am aware that, should investigation at any time disclose any such misrepresentation or falsification, my application will be rejected, I may be dismissed from employment, and disqualified from any employment with Pima County. I authorize Pima County to make all necessary and appropriate investigations to verify the information contained herein.

Signature _____

Date _____