Return Application To: Human Resource Office, Room 200 Rio Grande County Courthouse Del Norte, CO 81132 (719) 657-4217 humanresources@riograndecounty.org

RIO GRANDE COUNTY Employment Application

For Public Health Nurse Job Location: Rio Grande County Public Health Department

"An Equal Opportunity Organization"

Instructions: <u>Please print, write or type all information clearly</u>. The application must be filled out accurately and completely. Answer all questions. Do not leave an item blank. If an item does not apply, write N/A (not applicable). If you need additional space to answer a question fully, you may use full sheets of paper that are the same size as this page. On each additional page, be sure to include your name and the position title. You may also attach copies of documents or certificates, which support your application. All materials submitted become the property of Rio Grande County and will not be returned. <u>All statements made on this application are subject to verification. Exaggerated, false, or misleading statements may be cause for rejection of the application and/or termination of employment.</u>

Name				
Last Na	me	First Name		MI
Today's Date:		Email Address:		
Phone Numbe:		Other Telephone:		
Present Address:	Street	City	State	Zip
Mailing Address:				
(If different)	Street	City	State	Zip
Previous Address:				
	Street	City	State	Zip

EMPLOYMENT HISTORY: The information you provide, in addition to education, will be used to determine if you meet the minimum qualifications, and in some cases, placement on the eligibility list for the position you are seeking. Give a complete record including part-time work and volunteer experience and indicate number of hours worked weekly. Indicate date, month and year beginning and ending for each position held and a thorough description of duties performed for each. Start with your current or most recent employer. You may attach a separate sheet for additional information.

Employer:			Description of yo	ur work:	
Address:					
	Е П				
Telephone: Current Salary:		<u>Time Dart Time Dart Dart Time Dart </u>	Number and trip	ofnoonlo	Dates
Current Salary:	rositio	on Thue:	Number and type of people you supervised:		From:
				M	To:
Supervisor's name and title:		Reason for changing e	employment:	May we co	ntact your present employer?
Employer:			Description of yo	ur work:	
Address:					
Telephone:	Full '	Time □ Part Time □			
Salary:		on Title:	Number and type	e of people	Dates
·			you supervised:	• •	From:
Supervisor's name and title:		Reason for changing e	mnlovment	May we co	To: ntact this employer?
Supervisor s name and the.		Reason for changing c	empioyment.	whay we co	intact this employer :
Employer:			Description of yo	ur work•	
Linployer.			Description of yo	ui work.	
Address:					
Telephone:	Full	Time 🗆 Part Time 🗆			
Salary:		on Title:	Number and type	e of people	Dates
L.			you supervised:	• •	From:
Supervisor's name and title:		Reason for changing e	mulaumonti	May wa aa	To: ntact this employer?
Supervisor s name and title.		Reason for changing e	empioyment.	May we co	itact this employer:
Employer:			Description of yo	ur work:	
Employer.			Description of yo	ui work.	
Address:					
Telephone:		Time Part Time			1
Salary:	Positio	on Title:	Number and type you supervised:	e of people	Dates From:
			you superviseu:		гют: То:
Supervisor's name and title:		Reason for changing e	employment:	May we co	ntact this employer?

Employer:			Description of yo	ur work:	
Address:					
Telephone:	Full	Time 🗆 Part Time 🗆			
Salary:	Positio	on Title:	Number and type	e of people	Dates
			you supervised:		From:
					То:
Supervisor's name and title:		Reason for changing e	employment:	May we co	ntact this employer?

Additional Employment information: State briefly any accomplishments, hobbies, skills, scholastic honors, interests, or experiences that you would like noted. Attach additional sheets if necessary.

Circle Highest Grade Completed					I	Do you have a high school equivalency certificate or GED certificate?		
Grade School 1 2 3 4 5 6 7 8	High School 9 10 11 12	College 1 2 3 4		araduate	Ph. D. 4			
	School Name and Location	Dates At From	ttended To	Date Graduated	Degree Awardeo (BA, MB, PHD)	Credit I Hours Earned	Major Subject	Minor Subject
Grade School								
High School Or GED								
College Or								
<u>University</u> Graduate								
Other Education (Trade or Business)								

Are you studying now?_____ If so where?______ Courses:_____ Courses:____ Courses:_____ Courses:_____ Courses:_____

Military Service: Date of Service	Describe Primary Duties:
From To	
Branch:	
Type of Discharge:	

References: List Three (3) personal references who are not relatives or former employers

Name and Occupation	Address	Telephone Number

Qualified applicants will receive consideration for employment without regard to race, religion, color, sex, age, national origin or disability as established by Federal Law and State Law.

Have you ever worked for Rio Grande County? Yes No	Lowest Acceptable Salary:
If yes, please give date(s) of employment:	When are you available to begin work, if selected for employment?

Are you related to any employee of or is any member of your household employed by Rio Grande County?	Since your 18 th birthday, have you been convicted of any violation of the law other than a minor traffic offense?
Yes No	YesNo
If yes, please give person's	
Name:	Note: A conviction does not automatically mean you cannot be employed by the Association. The nature of the offense, how long ago it occurred, etc. are given consideration.
Relationship to you:	If yes, please give
County and Department:	Nature of Offense:
	Name and location of court:
	Disposition of case:
	Date:

The following section of the application lists the essential responsibilities and duties of the Public Health Nurse. For each duty or responsibility, please briefly explain why you feel you are qualified (or not qualified) to accomplish the task. Please include such information as to work experience and/or education. Certificates of accomplishment, training, or education may be attached for reference. The job of Public Health Nurse includes, but is not limited to, the following duties and responsibilities:

1. Describe your experience and knowledge of Public Health that would qualify and aide you in this position.

2. Discuss your experience working and communicating with community-based groups.

3. Discuss your experience performing nursing assessments, screening tests, and/or care coordination to individuals, families and/or groups. Include your experience providing immunizations, especially for infants and children.

4. A public health nurse needs to be self-motivated, self-directed, and able to work independently with minimal supervision. Please address your ability to work in this manner.

5. Many public health initiatives are based on data and funded through grants. Share any experience you have in evaluation, data collection and analysis, and/or working with grant funding and deliverables.

Please Read Carefully:

I hereby certify that the answers given by me to the foregoing questions and the statements made by me are full and true to the best of my knowledge and belief. I understand that any false information, omissions or misrepresentation of fact in this application or any supplements thereto, is cause for rejection of my application or discharge at any time during my contract. I voluntarily authorize my former employers, schools, and persons named herein to give information regarding me. I understand that if I am hired by Rio Grande County, the County shall require verification of my identity and eligibility for employment in the United States. I hereby release said organization from any liability to claim whatsoever for issuing this information. I also permit the Rio Grande County to conduct a police records investigation of my background if required for the position for which I am applying.

I understand that as a condition of employment, I may be required to pass the County's employment physical and any further medical/psychological examinations(s) required by the County or state and federal agencies.

Applicant's Signature

Date