# ASHLEY COUNTY EQUAL OPPORTUNITY EMPLOYER

## APPLICATION FOR COUNTY EMPLOYMENT

				//_ Date of Application
Last Name	First Name	Mido	Middle Name	
Street Address (inc	cludes City, State, and Zip Coo	de)	Т	elephone No. (include Area Code)
Are you at least 18	years of age? ☐ Yes ☐ No	Proof of age will be requi	red upon employment.	
Have you worked f When?	for a county or municipality b	efore?  Yes  No Wher	e?	
Position/general w	ork area for which you are ap	plying:		·
Rate of pay expecte	ed	Da	ite you can start?	
☐ FULL 7	ΓIME □ PART TIME	☐ TEMPORARY		
List friends/relative	es employed by the county: _			A
Why do you want t	to work for the county?			
Does applicant und	derstand job requirements of	a		and
can applicant perfo	orm the essential job requiren	nents for that position?   Yes	i □ No	
EDUCATION				
SCHOOL	NAME	LOCATION	COURSE	DEGREE
High School				
College or University				
Graduate School				
Technical Institute				
Business School				
Other				
If you have any spe	cial skills or qualifications tha	nt you want us to know about,	please describe them h	ere
U.S. MILITARY R Have you served in	ECORD: the United States Armed For	rces? □ Yes □ No		
If yes, please give d	ates of service: From	to	Brai	nch:
Have you ever beer	n convicted of a felony?	s 🗆 No		
If yes, please explai	n:			

FIRM NAME		
l'		
and the second s	Employed From:	
Annual Salary: Start	End	
Phone #	Job Title	
Describe your duties:		
Immediate Supervisor:	Reason for Leaving	
May we contact? ☐ Yes ☐ No		
FIRM NAME		
1	P. J. J.P.	
3.8	Employed From:	
8	End	
	Job Title	
and the second s	Possess for Louisian	
May we contact? ☐ Yes ☐ No	Reason for Leaving	
FIRM NAME		
I		
	Employed From:	
100	End	
1	Job Title	
25	Reason for Leaving	
May we contact? ☐ Yes ☐ No		
I		
I		
	Employed From:	
	End	
1	Job Title	
7		
	Reason for Leaving	
May we contact? ☐ Yes ☐ No		

I authorize the county to investigate all statements in this application and to secure any necessary information from all my employers, references and academic institutions. I hereby release all of those employers, references, academic institutions, and the county from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the county. I understand that any false or misleading statements will be sufficient cause for rejection of my application if the county has not employed me and for immediate dismissal if the county has employed me. In the event of my employment with the county, I will comply with all official policies of the county set forth in any county policy manual or other communications distributed by the county. I acknowledge receipt of a copy of the attached notice to applicants on this date.

Signature of Applicant	Date

### NOTICE TO APPLICANTS

#### 1. COUNTY POLICY

It is the County's policy to provide equal opportunity for all qualified persons; to prohibit unlawful discrimination in employment practices, compensation practices, personnel procedures, and the administration of benefit plans; and to otherwise provide the same or similar treatment and opportunities to all persons similarly situated.

#### 2. CONSTITUTIONALLY PROTECTED CONDUCT

- A. It is the policy of this county not to violate the Constitution or the laws of Arkansas or the United States.
- B. Should any applicant contend that he or she has been unlawfully discriminated against because of the race, color, religion, gender, national origin or disability or that he or she has been unlawfully punished for the exercise of a constitutionally protected liberty right (e.g., free speech, free association, political patronage, access to courts, privacy, etc.) or treated in any other unlawful or unconstitutional manner, the applicant shall request, in the time and manner set forth in this county employment policy, a "liberty right" hearing before the county grievance committee to provide the county's final policymaker with authority an opportunity to learn of the alleged unlawful discrimination or unlawful punishment and to thereby have an opportunity to voluntarily conform the conduct of county officials and county employees to the requirements of county policy.

#### 3. GRIEVANCE HEARING PROCEDURE

CAVEAT: The purpose of this Grievance Hearing Procedure is to establish a required procedure to resolve applicant grievances, and to thereby enable the county to voluntarily conform the conduct of county officials and county employees to the requirements of county policy. If the applicant does not follow this affirmatively county grievance procedure, the county will raise waiver and estoppel as affirmative defenses to any claims against the county filed by the applicant via any administrative or judicial procedures otherwise available to redress grievances.

#### A. Timely Requests for Grievance Hearing

- 1. The applicant's grievance hearing request shall be delivered to the County Grievance Committee in care of the County Judge no later than four-thirty o'clock (4:30) p.m. on the third full business day (weekends and holidays excluded) after any claimed deprivation for which a grievance hearing is requested.
- 2. The Grievance Committee shall respond in writing to all timely submitted Grievance Hearing Requests stating:
  - a. the time and place of the hearing, if the hearing request is granted, and
  - b. the reason for denial, if the hearing request is denied.

#### B. Hearing Issues and Burden of Proof:

- 1. Claims of discrimination due to race, color, religion, gender, or national origin.
  - a. The grieving applicant has the burden of proving by a preponderance of the evidence that he or she is being treated or affected differently than another person who, other than for race, color, religion, gender, or national origin is similarly situated with the applicant or the employee.
  - b. Where the applicant meets his or her burden of proof, the supervisory official has the burden of proving by a preponderance of the evidence that the proven inequality of treatment is necessary to effectuate a compelling county objective.

#### 2. Claims of Discrimination Due to a Disability

a. The grieving applicant has the burden of proving by a preponderance of the evidence that he or she is a qualified individual with a disability who, because of the disability, is being treated or effected differently than another person in regard to job application, procedures, advancement, dismissal, compensation, training, or other terms, conditions, or privileges of employment.

b. Where the applicant meets his or her burden of proof, the supervisory official has the burden of proving by a preponderance of the evidence that the proven difference in treatment or effect is job-related and necessary to effectuate a legitimate county objective, that performance of the job cannot be accomplished by reasonable accommodation, or that the needed accommodation would result in undue hardship on the county.

#### 4. The following definitions apply to claims of discrimination due to a disability.

- A. "Disabled" or "disability": A physical or mental impairment that substantially limits one or more of the major life activities of an individual; hearing a record of such an impairment; or being regarded as having such an impairment.
- B. "Regarded as having such an impairment": includes those individuals perceived to be at high risk of incurring a work-related injury.

#### C. "Discrimination" includes:

- 1. Limiting, segregating, or classifying a job applicant or employee in a manner that adversely affects his or her opportunities or status;
- Participating in contractual or other arrangements that have the effect of subjecting individuals with disabilities or discrimination;
- Using standards, criteria, or methods of administration in such a manner that results in or perpetuates discrimination;
- 4. Imposing or applying tests and other selection criteria that screen out or tend to screen out an individual with a disability or a class of individuals with disabilities unless the test or selection criteria are job-related and consistent with business necessity;
- 5. Failing to make reasonable accommodations to the known limitations of a qualified individual with a disability unless the covered entity can demonstrate that an accommodation would impose an undue hardship on the operation of the business; or
- Denying employment opportunities because a qualified individual with a disability needs reasonable accommodations.

#### D. "Reasonable accommodation" examples include:

- Making existing facilities used by employees readily accessible to the disabled;
- Job restructuring;
- Flexible or modified work schedules;
- Reassignments to other positions; and
- The acquisition or modifications of equipment or devices.
- E. "Undue hardship": an action requiring "significant difficulty or expense," considering:
  - 1. The overall size of the county with respect to the number of employees, number and type of facilities, and size of the budget;
  - 2. The type of operation maintained by the county including the composition and structure of the work force of that entity; and
  - 3. The nature and cost of the accommodation needed.
- F. "Qualified individual with a disability": an individual with a disability who, with or without reasonable accommodation, can perform the "essential functions" of the employment position held or desired.
- G. "Essential functions": job tasks that are fundamental but not marginal (not every job task is to be included in determining the essential functions).