## Monongalia County Sheriff's Tax Office Application for Employment

(Please Print or Type)

Name	Telephone									
Address_			<del>-</del>							
Email Add	lress									
Are you a	Are you a citizen of the United States? Are you at least 18 years of age									
Position A	pplying for:Tax Deputy									
Education										
	Name of Cohool	City	Years	Course	Dograd	Voor				
Elementary	Name of School	City	Completed	Course	Degree	Year				
High										
College										
Other										
What special qualifications do you possess?										
What office equipment can you operate?  References  (Do Not use relatives, former or current employers or co-workers)										
Name		Addres	ss & Phone		Occupation					
	e any experience for which y eing applied for, please inclu				alifications for t	the				
Have you ever worked for the County under a different name? If yes, please explain:										

## Monongalia County Sheriff's Tax Office Application for Employment Work Experience

Begin with most recent employment:

	Dates of	Starting	Final			
Name & Address of Company	Employment	Salary	Salary	Reason for leaving		
et your duties:						
	May we inquire?					
	Dates of	Starting	Final			
Name & Address of Company	Employment	Salary	Salary	Reason for leaving		
st your duties:						
	May we inquire?					
	Dates of	Starting	Final			
Name & Address of Company	Employment	Salary	Salary	Reason for leaving		
ist your duties:						
			Ma	ay we inquire?		
authorize investigation of the sta	tements containe	d in this app	olication.			
Signature of Applicant (Applicant	olication will be ke	ept on file fo	Date r 90 days)			
	return completed ap			<u>e</u>		
or office use:						
Date received	Date/Time called		-	Interview time		