

# Hughes County Employment Application

Rev. 8/23

**Instructions:** Complete Section One and attach resume and/or complete remainder of application. You must submit a separate application for each job opening. For job information contact the appropriate Hughes County Department or call 605 773 7477. You may submit your application by mail to **Human Resources, 104 E Capitol Ave, Pierre, SD 57501** or [countymanager@co.hughes.sd.us](mailto:countymanager@co.hughes.sd.us) You may also submit your application via email to the individual County Department. It is the applicant's responsibility to maintain an updated and accurate address. Hughes County will not resend or forward returned correspondence.

Section 1 – Required Information	
Requisition Number:	Job Title:
Name (First, Middle, Last):	
Phone:	Email:
Mailing Address: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"> <span>Street/Ave/Box /Apt, Lot, or Trailer #</span> <span>City</span> <span>State</span> <span>ZIP</span> </div>	
(If different from mailing) Residence Address: _____ <div style="display: flex; justify-content: space-between; font-size: small; margin-top: 5px;"> <span>Street/Ave/Box /Apt, Lot, or Trailer #</span> <span>City</span> <span>State</span> <span>ZIP</span> </div>	
Are you under age 18? <b>Yes No</b>	Have you ever worked for Hughes County? <b>Yes No</b>
Are you a citizen or currently authorized to work in the United States on a full-time basis? <b>Yes No</b> <b>NOTE:</b> Hughes County does not sponsor or assist persons in their efforts to become authorized to work in the United States.	
Have you ever been convicted of or pled guilty or nolo contendere/no contest to any felony? <b>Yes No</b> <b>NOTE:</b> A conviction will not automatically disqualify an applicant. The employer will consider the type and seriousness of the crime, the frequency of violations, the applicant's age at the time of conviction and the date of conviction or time elapsed since the conviction or completion of any jail sentence in addition to other job-related criteria.	
<b>Veterans:</b> To receive veteran's preference you must submit your DD-214. If you are eligible you will automatically receive veteran's preference.	
May we contact your current employer regarding your qualification prior to making an offer of employment to you? <b>Yes No</b>	
<b>Professional References – Please Include Name, Address and Phone Number</b>	
1.	
2.	
3.	
By submitting this application, you are certifying the information is true, correct and complete to the best of your knowledge and belief. A false or misleading statement or intentional omission of relevant information is cause for disciplinary action, including termination of employment.	

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Section 2 - Education	
<b>If all requested information is included on an attached resume, this section is not required.</b>	
Do you possess a High School diploma or GED?  <div style="display: flex; justify-content: space-between;"> <span>YES</span> <span>NO</span> </div>	School Name: Location of School - City/State:
Post-Secondary School Name: Location of School – City/State:	
Dates Attended Post-Secondary:	Major:  Minor:
Did you Graduate:  <div style="display: flex; justify-content: space-between;"> <span>YES</span> <span>NO</span> </div>	Type of Degree(s) Acquired:
<b>List all relevant licenses, certificates or registrations you possess (include expiration date, license number, and issuing state).            Also, identify any other educational experiences what may be relevant to the position for which you are applying.</b>	

Section 3 - Work History
<ul style="list-style-type: none"> <li>Attach either a current resume or complete the following section.</li> <li>Begin with most recent position and work backward; attach additional pages if necessary.</li> <li>Include all paid experience; you may include non-paid experience, if you feel it is relevant to the position.</li> </ul>
Job Title: _____ Dates: From _____ To _____
Employer: _____ City/State: _____
Supervisor's Name/Title: _____ Phone: _____
Reason for Leaving: _____
Responsibilities:    

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Job Title: \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Employer: \_\_\_\_\_ City/State: \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Responsibilities:

Job Title: \_\_\_\_\_ Dates: From \_\_\_\_\_ To \_\_\_\_\_

Employer: \_\_\_\_\_ City/State: \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Responsibilities:

