COUNTY OF BEAVER

JOB BID / REQUEST FOR CONSIDERATION FORM

For use by all current employees and all others requesting to be considered for an open position with Beaver County.

| NAME (Please Print): | | | |
|--|------------|--|------|
| Social Security Number: | | | |
| TITLE AND LOCATION OF POSITION FOR WHICH YOU ARE APPLYING | | | |
| CLASSIFICATION OF POSITION FOR WHICH YOU ARE APPLYING | | | |
| CURRENT EMPLOYMENT STATUS | | | |
| Complete this section <u>ONLY</u> if you are current Beaver County employee. | | | |
| TITLE AND LOCATION OF YOUR CURRENT POSITION | | | |
| CLASSIFICATION OF YOUR CURRENT POSITION | | | |
| Current Employment Status: (Check One) | | Full-Time Regular Part-Ti Irregular Part-T Temporary or S | Time |
| Current employees and new applicants – please verify that you have a current employment application on file in the Human Resources Office. | | | |
| Signature of Employee/ | 'Applicant | | Date |