

# APPLICATION FOR EMPLOYMENT

**PRINT IN INK OR TYPE.** These instructions must be followed exactly. Fill out application form completely. If questions are not applicable, enter "NA." **Do not leave questions blank.** Be sure to sign when completed. The Soil and Water Conservation District is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. You may make copies of this application and enter different position titles, but **each copy must be signed. Resumes will not be accepted in lieu of applications,** unless specifically stated in the job vacancy notice. This application becomes public record and is subject to disclosure.

With few exceptions, you have the right to request and be informed about information that the district collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the district to correct any information that is determined to be incorrect.

NAME \_\_\_\_\_  
(Last) (First) (Middle)

MAILING ADDRESS \_\_\_\_\_ AC ( ) \_\_\_\_\_  
(Street) (City) (State) (Zip) (Country) (Home Phone)

E-MAIL ADDRESS \_\_\_\_\_ AC ( ) \_\_\_\_\_

List any other names used if different from name given on this application. \_\_\_\_\_ (Work phone, optional)

List exact title of position or type of work and location for which you wish to apply:	Closing Date
List the district with which you wish to apply :	Do you have any relatives working for this district? If so, list names and relationships:

Full-Time  Part-Time  Summer  Temp/Project  Date available for work? \_\_\_\_\_

Are you willing to work hours other than 8-5? Yes  No  What days are you unable to work? \_\_\_\_\_

Are you willing to Travel? Yes  No  If yes, what percent of time? \_\_\_\_\_

Current Driver's License # (if required for position) \_\_\_\_\_  
(State) (Number)

Commercial Driver's License Yes  No

Are you at least 17 years of age? Yes  No

Geographic preference. (Be specific to city/area. If no preference, write "statewide.") \_\_\_\_\_

Have you ever been convicted of a felony or subjected to deferred adjudication on a felony charge? Yes  No  If your answer is "Yes," explain in concise detail on a separate page, giving the dates and nature of the offense, the name and location of the court, and the disposition of the case(s). A conviction may not disqualify you, but a false statement will. Note: Some districts may require additional information related to convictions of misdemeanors.

**EDUCATION (NOTE: Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications and registrations.)**

Indicate Highest Grade Completed 1 2 3 4 5 6 7 8 9 10 11 12 Did you graduate from high school or receive GED? Yes  No

Type of School	Name and Location of School	Dates Attended				Sem/clock Hours Completed	Graduated		Expected Graduation Date	Type of Diploma or Degree	Major/Minor Fields of Study
		From		To			Yes	No			
		Mo.	Yr.	Mo.	Yr.						
Undergraduate Colleges or Universities											
Graduate Schools											
Technical, Vocational, or Business Schools											





Position Title						Immediate Supervisor			Full-Time	
Employer:						Name			Part-Time	
Mailing Address:						Title			Summer	
City and State/Zip:						Supervisor's Telephone No.			Temp/Project	
Employer's Telephone No. AC ( )						AC ( )			Give average number of hours worked per-week if part-time	
Starting Date			Leaving Date			Current/ Final Salary	Technical	If supervisory, number of employees you supervised		
Mo	Day	Yr	Mo	Day	Yr		Non-managerial			
						Supervisory/Managerial				

Summary of experience:

Specific reason for leaving:

Position Title						Immediate Supervisor			Full-Time	
Employer:						Name			Part-Time	
Mailing Address:						Title			Summer	
City and State/Zip:						Supervisor's Telephone No.			Temp/Project	
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Specific reason for leaving:

Position Title						Immediate Supervisor			Full-Time	
Employer:						Name			Part-Time	
Mailing Address:						Title			Summer	
City and State/Zip:						Supervisor's Telephone No.			Temp/Project	
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Summary of experience:

Specific reason for leaving: