Employment Application

Broadwater Conservation District Administrator

PERSONAL DATA

Name _____

Present Address _____ City _____ State _____ Zip _____

Phone ( ) - Message Phone ( ) - E-Mail Address _____

Driver's License: Operator ☐ ☐ _____ _____

EDUCATION

High School Diploma or GED? ☐ Yes ☐ No Post Secondary Degree? _____

Name of school beyond High School _____

Training Length _____ Date Completed _____

Major _____ Minor _____

WORK EXPERIENCE *(List most recent work experience first)*

Company Name _____ Immediate Supervisor _____

Complete Address _____

Street / P.O. Box *City* *State* *Zip Code*

Job Title _____ Phone ( ) -

Job Description (duties, skills, equipment used) _____

Dates: From *(mm/yy)* _____/_____ To *(mm/yy)* _____/_____ Reason for leaving _____

WORK EXPERIENCE

Company Name _____ Immediate Supervisor _____

Complete Address _____

Street / P.O. Box *City* *State* *Zip Code*

Job Title _____ Phone ( ) -

Job Description (duties, skills, equipment used) _____

Dates: From *(mm/yy)* / To *(mm/yy)* / Reason for leaving _____

ADDITIONAL INFORMATION THAT COULD HELP YOU QUALIFY FOR THIS POSITION

Examples include; classes (include dates), certificates, current licenses, specific equipment and other skills.

LIST REFERENCES *(preferably persons who know about your work/training)*

Name	Address	Phone Number
		( ) -
		( ) -
		( ) -

The information that you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment or, if hired, may be grounds for termination at a later date. Do you want to be informed before we contact your present employer? ☐ **Yes** ☐ **No**

With my signature below (typed or written), I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me and I release all persons or companies from any liability or responsibility for providing such information.

Signature: _____ **Date:** _____