

EMPLOYMENT HISTORY

Beginning with your present or last job, please provide the following information about your employment record. If additional space is needed, please continue with the same format on a separate sheet of paper. Explain any gaps in employment in the "APPLICANTS NOTES ON EMPLOYMENT" section that follows. Please complete thoroughly and DO NOT SUBSTITUTE RESUME FOR THIS SECTION!

***We will check references with the employers you have listed unless you indicate otherwise.*

1) **NAME AND ADDRESS OF EMPLOYER:** _____

PHONE NO.: __ (____) _____ MAY WE CONTACT? YES NO NAME OF SUPERVISOR: _____

TYPE OF BUSINESS: _____ YOUR TITLE/POSITION: _____

STARTING DATE: ____/____/____ ENDING DATE ____/____/____ REASON FOR LEAVING: _____

TYPE OF WORK PERFORMED: _____

2) **NAME AND ADDRESS OF EMPLOYER:** _____

PHONE NO.: __ (____) _____ MAY WE CONTACT? YES NO NAME OF SUPERVISOR: _____

TYPE OF BUSINESS: _____ YOUR TITLE/POSITION: _____

STARTING DATE: ____/____/____ ENDING DATE ____/____/____ REASON FOR LEAVING: _____

TYPE OF WORK PERFORMED: _____

3) **NAME AND ADDRESS OF EMPLOYER:** _____

PHONE NO.: __ (____) _____ MAY WE CONTACT? YES NO NAME OF SUPERVISOR: _____

TYPE OF BUSINESS: _____ YOUR TITLE/POSITION: _____

STARTING DATE: ____/____/____ ENDING DATE ____/____/____ REASON FOR LEAVING: _____

TYPE OF WORK PERFORMED: _____

4) **NAME AND ADDRESS OF EMPLOYER:** _____

PHONE NO.: __ (____) _____ MAY WE CONTACT? YES NO NAME OF SUPERVISOR: _____

TYPE OF BUSINESS: _____ YOUR TITLE/POSITION: _____

STARTING DATE: ____/____/____ ENDING DATE ____/____/____ REASON FOR LEAVING: _____

TYPE OF WORK PERFORMED: _____

MILITARY SERVICE

Did you receive any job related training in the United States Military? Yes No

If yes, describe the branch of service, dates and location of such training below.

REFERENCES

List name, address, and telephone number of three (3) business/work references who are NOT related to you and who are NOT previous supervisors. If not applicable, list three school or personal references that are not related to you.

1) Name: _____ Phone: (_____) _____

Address: _____

Years Known: _____ Business: _____

2) Name: _____ Phone: (_____) _____

Address: _____

Years Known: _____ Business: _____

3) Name: _____ Phone: (_____) _____

Address: _____

Years Known: _____ Business: _____

I understand and agree that any misrepresentation by me on this application will be sufficient cause for voiding this application or for separating me from the service of the Sweetwater County Recreation Board if I have become employed. I further understand that acceptance of an offer of employment does not create a contractual obligation upon the Recreation Board to continue to employ me in the future.

I authorize the Sweetwater County Recreation Board to investigate my work performance with my references and with my previous employers, (except as noted), and to investigate other such records, (i.e., motor vehicle operator records, criminal records etc.), pertinent to the job(s) for which I have applied. I hereby release from liability the Sweetwater County Recreation Board and its representatives for seeking such information and all other persons, corporations, or organizations for furnishing such information.

I understand and consent to physical examinations, including drug and alcohol screenings, and other tests/evaluations, etc. that may be required to certify my suitability for the work for which I have applied, and I release from liability the Recreation Board and its representatives a for any legitimate actions it takes relating to the results of such tests. I also understand that refusal to submit to the physical and drug screening will constitute voluntary withdrawal of my application for employment. I also understand that the Sweetwater County Recreation Board may refuse to hire me as a result of the examination, and I agree to hold the Sweetwater County Recreation Board harmless for such refusal.

If I become employed, I also agree to such physical examinations, including drug and alcohol screenings, and other tests/s evaluations, etc. As reasonably may be required to certify my continuing suitability for any work which I may encounter while an employee of the Sweetwater County Recreation Board. I further agree to hold the Sweetwater County Recreation Board harmless of the consequences of such examinations, screenings, tests, etc.

The Sweetwater County Recreation Board considers all applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital, or veteran status, or any other legally protected status.

SIGNATURE OF APPLICANT

(NO APPLICATION WILL BE CONSIDERED WITHOUT A VALID SIGNATURE)

DATE

