



**Parachute Battlement Mesa
Parks and Recreation District**

Employment/Job Application

PERSONAL INFORMATION

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____ Phone Number: (____) _____

Position desired? _____

Can you perform the essential functions of the position for which you are applying?

YES NO

If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please ask the interviewer before you answer this question)

When are you available to begin work? _____

Are you legally eligible to be employed in the United States? YES NO

(Proof of identity and eligibility will be required upon employment)

Are you over the age of 18 years? YES NO

(If no, you may be required to provide authorization to work.)

Have you ever worked for this District before? YES NO

If yes, where? _____ When? (Give dates) _____ Job Title: _____

Do you have any relatives or friends who work for the District? YES NO If yes, who and where do they work?

Have you ever done any volunteer work? YES NO If yes, describe: (Omit any volunteer work which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities)

Are you available to work: DAYS NIGHTS WEEKENDS FULL TIME If you cannot work full time, please explain:

Days and Hours Available:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

Are you presently employed? YES NO

If yes, may we contact your employer? YES NO

If presently employed, why are you considering leaving?

Do you belong to any professional, trade, business or civic organizations that deal with the position for which you are applying? YES NO If yes, please explain and list offices held: (Omit any organization which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)

Account for any full month since leaving school (high school or college) that you were not working:

From	To	Reason
Mo/Yr		
Mo/Yr		
Mo/Yr		

EDUCATION

	Name and Location of School	Course of Study	No. of Years Completed	Diploma or Degree Received
High School				
College				
Vocational or Trade School				
Graduate Work				

Have you completed any special courses, seminars and/or training directly related to the position for which you are applying? YES [] NO [] If yes, please describe:

List academic honors, extracurricular activities, offices held, etc. in high school or college:

(Omit any which reflects your race, color, religion, age, sex, sexual orientation, marital status or disabilities.)

EMPLOYMENT

Start with your current or most recent position

Name of Employer		Telephone Number	
Full Address		Supervisor's Name and Title	
Dates Employed	From Month/Day/Year	To Month/Day/Year	
Describe the Work Performed			
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Full Address		Supervisor's Name and Title
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Describe the Work Performed		

Name of Employer		Telephone Number
Full Address		Supervisor's Name and Title
Dates Employed	From Month/Day/Year	To Month/Day/Year
Describe the Work Performed		

PERSONAL REFERENCES

Give three references (not relatives or employers)

Name	Occupation
Full Address	Telephone Number
Street _____	
City _____ State _____ Zip _____	
Name	Occupation

Full Address Street _____ City _____ State _____ Zip _____	Telephone Number
Name	Occupation
Full Address Street _____ City _____ State _____ Zip _____	Telephone Number

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

IMPORTANT, PLEASE READ AND SIGN

I understand that failure to reveal any prior employer, or giving false or misleading information by me on any part of this Application for Employment can result in disqualification for employment consideration or, if hired, may be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

Signed: _____

Do not write below this line