**Pomeroy Conservation District**

**Employment Application**

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| **Name** (last, first, middle) | | | | | **Social Security Number** | | | **Date of Birth** |
| **Address** (street, city, state, zip code) | | | | | | | **Phone** | |
| **U.S. Citizen**  YES 🞎 NO 🞎 | | **Type of VISA** (if not a U.S. Citizen) | | | | List any relatives now officially associated with the district | | |
| **Education and Training**: (include high school, GED, trade & vocational schools, undergraduate and graduate degrees) | | | | | | | | |
| Name and Type of School | | Address | | Major | Minor | Dates Attended or Date Degree Was Received | | Degree, or Credits Completed |
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| **List special skills**, qualifications or accomplishments related to the position | | | | | | | | |
| Do you have a personal **vehicle** you can use for this position? YES 🞎 NO 🞎 | | | | | | | | |
| Do you have a valid state driver’s license?  YES 🞎 NO 🞎 | | | If yes, has your license ever been suspended or revoked?  YES 🞎 NO 🞎 | | | If yes, please explain: | | |
| Give the number of moving traffic violations you have had over the past three (3) years: | | | | | Give the number of traffic accidents you have had in the past three (3) years: | | | |
| Have you ever been convicted of a criminal offense? YES 🞎 NO 🞎  Are you currently out on bail or on your own recognizance pending trial? YES 🞎 NO 🞎  Have you ever been convicted of driving under the influence of alcohol or drugs? YES 🞎 NO 🞎  (If your answer is yes to any of these questions please explain on a separate sheet of paper reporting all cases and dates except minor traffic violations, sealed or juvenile convictions.) | | | | | | | | |
| **List anticipated work schedule availability?** | | | | | | | | |
| Month: | Days: | | | | | | | |
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| **Previous Work Experience** (please list the most recent experience first and include U.S. Military Service) | | | | | |
| A |  | | | | |
| Name of Employer | | | Phone (include Area Code) | | Job Title |
| Address (street, city, state, Zip Code) | | | | Supervisors name and Title | |
| Describe Work Performed | | | | | |
| Date Started | | Date Ended | | Reason for Leaving | |
| B |  | | | | |
| Name of Employer | | | Phone (include Area Code) | | Job Title |
| Address (street, city, state, Zip Code) | | | | Supervisors name and Title | |
| Describe Work Performed | | | | | |
| Date Started | | Date Ended | | Reason for Leaving | |
| C |  | | | | |
| Name of Employer | | | Phone (include Area Code) | | Job Title |
| Address (street, city, state, Zip Code) | | | | Supervisors name and Title | |
| Describe Work Performed | | | | | |
| Date Started | | Date Ended | | Reason for Leaving | |
| I certify that the above information is correct and complete to the best of my knowledge and belief. I make this statement with the knowledge that any false or misleading statement or omission of material fact MAY BE SUFFICIENT CAUSE FOR DISMISSAL. I authorize the district to verify any of the information I have submitted in this application.  Signature: | | | | | |