Thank you for your interest in the XX position.

Please complete the employment application and attach a resume and cover letter. Include letters of recommendations if available. Thank you.

Submit to:

XX Conservation District

Address

Address

Or email to Email Address

EMPLOYMENT APPLICATION

The XX Conservation District is a subdivision of state government, and this position serves as a public employer. XX Conservation District does not discriminate in its hiring practices based on race, color, national or ethnic origin, ancestry, age, religion or religious creed, disability or handicap, sex or gender, military or veteran status, or any other characteristic protected under applicable federal, state, or local law.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Applicant Information** | | | | | | | | | | | | | | | | | | | |
| Last Name |  | | | | | | | | First |  | | M.I. | | | | | Date |  | |
| Street Address |  | | | | | | | | | | | Apartment/Unit # | | | | | |  | |
| City |  | | | | | | | | State |  | | ZIP | | |  | | | | |
| Phone |  | | | | | | | | E-mail Address |  | | | | | | | | | |
| Date Available |  | | | | | | Social Security No. | | |  | | Desired Salary | | | | |  | | |
| Position Applied for | | |  | | | | | | | | | | Date of Birth | | |  | | | |
| Are you a citizen of the United States? | | | | | | | YES | NO | | If no, are you authorized to work in the U.S.? | | | | | | | YES | | NO |
| Have you ever been employed by this CD? | | | | | | | YES | NO | | If so, when? | |  | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | YES | NO | | If yes, explain | |  | | | | | | | |
| Type of Driver’s License | | | | |  | | State Issued |  | | License Number | |  | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **Education** | | | | | | | | | | | | | | | | | | | |
| High School |  | | | | | | | Address | |  | | | | | | | | | |
| From |  | To | |  | | Did you graduate? | | YES | | NO | Degree | | |  | | | | | |
| College |  | | | | | | | Email/  Phone | |  | | | | | | | | | |
| From |  | To | |  | | Did you graduate? | | YES | | NO | Degree | | |  | | | | | |
| Other |  | | | | | | | Email/  Phone | |  | | | | | | | | | |
| From |  | To | |  | | Did you graduate? | | YES | | NO | Degree | | |  | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| **REFERENCES:** *List three references that you are not related to and have known for at least one year.* | | | | | | | | | | | | | | | | | | | |
| **Full Name** |  | | | | | | | | | Title | |  | | | | | | | |
| Company |  | | | | | | | | | Phone | | ( ) | | | | | | | |
| Address |  | | | | | | | | | Email | |  | | | | | | | |
| **Full Name** |  | | | | | | | | | Title | |  | | | | | | | |
| Company |  | | | | | | | | | Phone | | ( ) | | | | | | | |
| Address |  | | | | | | | | | Email | |  | | | | | | | |
| **Full Name** |  | | | | | | | | | Title | |  | | | | | | | |
| Company |  | | | | | | | | | Phone | | ( ) | | | | | | | |
| Address |  | | | | | | | | | Email | |  | | | | | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Previous Employment** *(List most recent employment first and in chronOlogical order)* | | | | | | | | | | | | | | | | | | |
| **Company** | | |  | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | | Supervisor |  | | | | | |
| Job Title | |  | | | | | | | | Starting Salary | | $ | | Ending Salary | | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
| **Company** | | |  | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | | Supervisor |  | | | | | |
| Job Title | |  | | | | | | | | Starting Salary | | $ | | Ending Salary | | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
| **Company** | |  | | | | | | | | | | Phone | ( ) | | | | | |
| Address | |  | | | | | | | | | | Supervisor |  | | | | | |
| Job Title | |  | | | | | | | | Starting Salary | | $ | | Ending Salary | | | | $ |
| Responsibilities | | | | |  | | | | | | | | | | | | | |
| From |  | | | | To | |  | | Reason for Leaving | |  | | | | | | | |
| May we contact your previous supervisor for a reference? | | | | | | | | | | | YES | NO |  | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Military Service** | | | | | | | | | | | | | | | | | | |
| Branch | |  | | | | | | | | | | | From | |  | To |  | |
| Rank at Discharge | | | | | |  | | | | | | | Type of Discharge | | | | |  |
| If other than honorable, explain | | | | | | | |  | | | | | | | | | | |
| *For the following questions, please use an additional sheet of paper only if more room is needed. For the purposes of the following questions the term “Employment” includes work as an “Independent Contractor”.* | | | | | | | | | | | | | | | | | | |
| **are you familiar with the operation and mission of conservation districts (cd)?** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Have you ever worked as an employee or INDEPENDENT contractor for a CD? □ yes □ no If so, list CD and describe work performed.** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **DESCRIBE A specific natural resource PROJECT(S) here and describe why it was successful. also list additional natural resource experience here.** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **list any agriculture experience** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **list any experience coordinating workshops or seminars** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **List any teaching experience** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| |  | | --- | | **list computer, electronic or mechanical equipment that you are qualified to operate** | |  | |  | |  | | **List any civic, volunteer or professional affiliations that are relevant to this position** | | |  | | |  | | |  | | | **List any skills or hobbies that may be relevant for this position** | | | |  | | | |  | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Disclaimer and Signature** | | | | | | | | | | | | | | | | | | |
| Information to the Applicant: As part of our procedure for processing your employment application, your schooling, personal, and professional references may be checked. If you have misrepresented or omitted any facts on this application, and are subsequently hired, you may be discharged from your job. If you are currently employed and do not want the district to contact your current employer, you must inform the District of this request. Applications will be kept for a period of one year and may be open to the public for view.  I understand and agree to a background check and drug testing if hired.  I certify that my answers are true and complete to the best of my knowledge. | | | | | | | | | | | | | | | | | | |
| Signature | | | |  | | | | | | | | | | | Date |  | | |