

Sheridan Recreation District

P.O Box 6308

Sheridan, Wyoming 82801

(307) 674-6421

APPLICATION FOR EMPLOYMENT



Date: _____.

Positions Desired: 1. _____.
2. _____.

Name: _____.

Address	Street	City	State	Zip Code
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Telephone Number:	Social Security Number:
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Education and Training

Highest grade completed: 7 8 9 10 11 12 or (GED) College: 1 2 3 4 5 6

Name and location of last elementary or high school Attended: _____.

Names & location of College, and/or Vocational Schools attended:	Dates Attended From - To	Course of study	Graduate? Yes or No	Degree or certificate
	-			
	-			
	-			
	-			

List any apprenticeships, internships, trade schools, and military schools, completed or not:

Name of School or Apprenticeship	Dates From - To	Employer & Address	Type of Training	Graduate? Yes or No

Please list any additional training, and/or scholastic honors,

_____.

List all equipment/machines that you can operate. After each piece of equipment, list the number of years of experience you have had with that piece of equipment:

_____.

_____.

_____.

Licenses or Certificates Held: _____.

_____.

Military

Are you a veteran of The Armed Forces of The United States? YES or NO

If so, please attach a copy of you DD124.

Military Service: From _____ To _____.

Employment

LIST ALL EMPLOYMENT EXPERIENCE STARTING WITH PRESENT OR MOST RECENT EMPLOYER FIRST.

Most recent or present Employer:

Name of Employer _____ From ___ / ___ To ___ / ___.

Address _____.

Telephone Number _____.

Your Title _____.

Salary/monthly or hourly Beginning: _____ Ending: _____.

Describe in detail your duties and responsibilities: _____.

_____.

_____.

Number of employees you supervised: _____.

Your Supervisor: _____ May we contact? YES NO

Reason for leaving? _____.

Next recent Employer:

Name of Employer _____ From ___ / ___ To ___ / ___ .

Address _____ .

Telephone Number _____ .

Your Title _____ .

Salary/monthly or hourly Beginning: _____ Ending: _____ .

Describe in detail your duties and responsibilities: _____ .

_____ .

_____ .

Number of employees you supervised: _____ .

Your Supervisor: _____ May we contact? YES NO

Reason for leaving? _____ .

Next recent Employer:

Name of Employer _____ From ___ / ___ To ___ / ___ .

Address _____ .

Telephone Number _____ .

Your Title _____ .

Salary/monthly or hourly Beginning: _____ Ending: _____ .

Describe in detail your duties and responsibilities: _____ .

_____ .

_____ .

Number of employees you supervised: _____ .

Your Supervisor: _____ May we contact? YES NO

Reason for leaving? _____ .

REFERENCES

List those that know of your abilities.

1. 1. Name: _____ Occupation: _____

1. Address: _____ Phone: _____.

2. 2. Name: _____ Occupation: _____

1. Address: _____ Phone: _____.

3. 3. Name: _____ Occupation: _____

1. Address: _____ Phone: _____.

2.

- 1. Do you have a valid driver's License? YES NO
- 2. Do you have any relatives who work for the Sheridan Rec? YES NO
- 3. If so who? _____.

The facts made in my application are to the best of my knowledge, true and complete. I understand that any false statements or misrepresentations given by me on this application are sufficient cause for dismissal.

I understand that acceptance of this application for employment by the Sheridan Recreation District does not constitute a contractual obligation for employment now or at any future date.

Signature _____ Date _____.

THE SHERIDAN RECREATION DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER

Interviewed By: _____ Date: _____.

Comments: