

WATFORD CITY PARK DISTRICT

Employment Application



Returning Seasonal Employees may fill out first section only (if no changes need to be reflected or considered.)

APPLICANT INFORMATION												
Last Name			First			M.I.		Date				
Street Address												
City				State				ZIP				
Phone				E-mail Address								
Date Available						Desired Salary						
Position Applied for												
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?			YES <input type="checkbox"/>		NO <input type="checkbox"/>
Have you ever worked for Watford City Park District?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Have you ever filled out an application with us before?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?					
Are you 18 years of age or older?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If not, age?					
EDUCATION												
High School			Address									
From		To		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
College			Address									
From		To		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
Other			Address									
From		To		Did you graduate?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree				
REFERENCES (PROFESSIONAL)												
Full Name					Relationship							
Company					Phone							
Address												
Full Name					Relationship							
Company					Phone							
Address												
Full Name					Relationship							
Company					Phone							
Address												

PREVIOUS EMPLOYMENT (MOST RECENT FIRST)			
ARE YOU CURRENTLY ON "LAYOFF" STATUS AND SUBJECT TO RECALL?			
YES <input type="checkbox"/>		NO <input type="checkbox"/>	
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
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 <input type="checkbox"/> NO <input type="checkbox"/>			
DRIVERS LICENSE (CERTAIN POSITIONS REQUIRE A DRIVERS LICENSE, PLEASE INQUIRE IF YOU DO NOT HAVE ONE)			
State issued:		From	To
License #		Class #	
Describe the nature of any license suspensions etc. within 10 years:			
MILITARY SERVICE			
Have you served in the Armed forces of the United States? _____ Yes _____ No		From	To
Are you claiming Veteran's Preference under North Dakota Statute?		_____ Yes _____ No	
<i>(You must submit a DD214 verifying each claim)</i> Are you claiming status of a disabled veteran? _____ Yes _____ No			

(A copy of your letter from the VA claiming disability must be attached to this application.)

**PLEASE DESCRIBE ANY HONORS, OR CREDENTIALS, THAT MAY BE HELPFUL IN CONSIDERING APPLICATION.
(YOU MAY EXCLUDE ANY INDICATORS OF RACE, RELIGION, GENDER, ORIGIN, HANDICAPS OR ANY OTHER PROTECTED STATUS)**

**PLEASE DESCRIBE ANY CERTIFICATES, LICENSES, OR TRAINING THAT MAY HELP WITH APPLICATION.
(YOU MAY EXCLUDE ANY INDICATORS OF RACE, RELIGION, GENDER, ORIGIN, HANDICAPS OR ANY OTHER PROTECTED STATUS)**

HOW DID YOU HEAR ABOUT US?

DISCLAIMER AND SIGNATURE (APPLICANT'S STATEMENT)

- I certify that my answers are true and complete to the best of my knowledge.
- If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.
- I authorize the Watford City Park District to contact my References and previous employers (unless otherwise indicated on this form).
- This Application shall be considered active for no longer than 45 days.
- I hereby understand and acknowledge that the terms of employment are considered "at will" and that employees may resign at any time, and that Employer may discharge the employee at any time. It is further understood that "at will" relationship may not be altered unless such change is specifically acknowledged in writing by authorized executive of this organization.
- In the event of employment, any false or misleading information in application or interview(s) may result in disciplinary action (up discharge).

Signature

Date