

ATHENS SOIL AND WATER CONSERVATION DISTRICT

69 S. Plains Road, The Plains, Ohio 45780

Telephone (740) 797-9686

Fax (740) 797-9079

Application for Employment

PERSONAL:

Full Name: _____

Present Address: _____
(street) (home phone & business phone)

(city) (state) (zip) (county)

Date available for employment: _____ Salary Desired \$: _____

Person to be contacted in case of an emergency: _____
(name)

(address) (home phone) (business phone)

Military/Service _____ Mo./Yr. _____ Mo./Yr. _____
(branch) (rank/rate) (from) (to)

EDUCATION: (Attach additional sheets if necessary)

High School attended (name & address): _____

Major course of study: _____

Dates attended: _____ Graduate/Degree: _____

Additional Education (name & address of school): _____

Dates attended: _____ Graduate/Degree: _____

Specify how you meet the minimum qualifications for this position: _____

WORK EXPERIENCE: (Please list the most recent employment first)

Employer (name & address): _____

Job title & duties: _____

Immediate Supervisor: _____ Phone No: _____

Reason for leaving: _____

Dates of employment: from: _____ to: _____

Employer (name & address): _____

Job title & duties: _____

Immediate Supervisor: _____ Phone No: _____

Reason for leaving: _____

Dates of employment: from: _____ to: _____

Employer (name & address): _____

Job title & duties: _____

Immediate Supervisor: _____ Phone No: _____

Reason for leaving: _____

Dates of employment: from: _____ to: _____

(Attach additional sheets if necessary for employment references)

REFERENCE:

List name, address & phone number for three references and years known (*no relatives*):

1) _____

2) _____

3) _____

List agricultural/soil experience: _____

How did you learn of the position? _____

On an additional blank sheet, write one paragraph explaining why you would like to work for the Athens Soil and Water Conservation District.

I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. I certify that all statements made within this document are true to the best of my knowledge.

Date: _____ Signature: _____