



# Franklin County Conservation District

## Employment Application

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

How long have you lived at this address? Since \_\_\_\_\_

#### Previous Address:

\_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

How long have you lived at this address? From \_\_\_\_\_ To \_\_\_\_\_  
**(Please list all prior addresses at which you lived within ten year of this application on a separate paper)**

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Social Security No.: \_\_\_\_\_ Date Available: \_\_\_\_\_ Status \_\_\_\_\_ Full Time  
Desired: \_\_\_\_\_ Part Time

Position Applied for: \_\_\_\_\_

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 worked for this company? YES  NO  If yes, when? \_\_\_\_\_

Have you previously been employed by a Conservation District? (If Yes, please provide the name of the district, dates of employment, and other relevant information in "Employment History" section.) YES  NO

Have you previously applied for employment with the Franklin County Conservation District. YES  NO  If Yes, give dates you applied and disposition: \_\_\_\_\_

Have you ever been convicted of a felony or misdemeanor? YES  NO  If yes, please explain the nature of the conviction, the date, sentence (if any) and any other relevant information  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Education**

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Course of Study or Major: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Course of Study or Major: \_\_\_\_\_

Please list additional certificates, degrees, training or work related experience which may be relevant to your candidacy for employment with the Franklin County Conservation District:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References**

*Please list three references who are not previous employers or relatives.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Previous Employment-**

**Start with current or most recent employer**

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: \_\_\_\_\_  
 YES NO  
 May we contact your previous supervisor for a reference?

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Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
 Responsibilities: \_\_\_\_\_  
 From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
 YES NO  
 May we contact your previous supervisor for a reference?

\*Please list all additional employers and requested information on a separate sheet of paper

Please fully explain all periods of self-employment and any gaps in you employment history

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Military Service**

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
 Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_  
 If other than honorable, explain: \_\_\_\_\_

**Disclaimer and Signature**

*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.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT'S STATEMENT**

Please read carefully before signing

I hereby affirm that the information provided on this Application and accompanying resume (if any) is true and correct to the best of my knowledge. I also agree that any falsified information or significant omissions may disqualify me from further consideration for employment and may result in my discharge if discovered at a later date. I agree that Franklin County Conservation District shall not be liable in any respect if my employment is terminated because of false statements, answers or omissions.

I authorize Franklin County Conservation district to investigate all statements made in this Application, contained in my resume, or made by me in any interview or other document. I authorize Franklin County Conservation District to investigate all statements in this Application and to secure any necessary information from employers, references, educational institutions, and certifying entities from any and all liability arising from their giving or receiving information about my employment history, academic credentials or qualifications, and/or my suitability for employment.

I hereby agree to submit to any illegal drug screening test that may be required as a condition of employment and understand that to refuse to drug testing during the Application process or during the course of my employment may result in a rejection of my Application, discipline and/or discharge. I understand that I may receive a job offer which is conditioned upon my completion of a medical examination or inquiry, or a demonstration of my ability to perform the essential functions of the position for which I applied.

In the event of my employment with Franklin County Conservation District, I understand that my employment is terminable at will, that I am not being employed for any specified time, and that this Application is not a contract for employment. I recognize that, if hired, either I or Franklin County Conservation District remain free to terminate the employment relationship at any time, with or without cause, with or without notice.

I understand this Application will be considered active for a period of 60 days. Should I wish to be considered for employment beyond this period of time, I acknowledge that I must complete another application form or request in writing that my Application continue to be considered.

**DATE**

**SIGNATURE OF APPLICANT**

\_\_\_\_\_

\_\_\_\_\_

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Franklin County Conservation District is an equal opportunity employer and considers all qualified candidates for employment without regard for race, color, religion, gender, national origin, ancestry, age, physical or mental disability, marital or veteran status, pregnancy or any other legally protected status.

If you require any special reasonable accommodation in completing this application, interviewing, completing any pre-employment testing or otherwise participating in the employment selection process, please advise us.