

Wasco Recreation & Parks District Application for Employment

Date:	Po	osition:			
Name:					
			Email:		
Telephone Number:			_ Cell:		
Social Secu	rity Number:			_	
Please CircleYesNoYesNoImmigration	Are you prevented	u under 18, can you furnis from lawfully becoming e enship or Immigration sta	mployed in thi	is country because of Visa or	
Complete onl	y if the job requires :	a drivers' license			
Yes No	Do you have the appropriate valid driver's license?				
Yes No	Is driver's license presently restricted, suspended or revoked?				
	DL #	Expiration date (month/year)		
Employme Years	nt Experience: F	Please begin with yo	ur most rec	ent job.	

From/To	Employer	Address	Phone	Position

May we contact your present employer? Yes____ No____ Date you would be available to begin work: _____

Education: Years

From/To	Name of School	Location	Graduate or Degree

Special Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experience that pertains to position applied for:

Please List three Professionals References:

Name	Complete Address	Phone Number

Applicants Statement

I certify all statements made herein are true ad correct to the best of my knowledge. I understand that false statements made on this application may cause for non-employment of for dismissal, if employed. I hereby authorize any investigation to obtain information required by this application.

Date: _____

Signature of applicant: _____