

LANCASTER COUNTY CONSERVATION DISTRICT

APPLICATION FOR EMPLOYMENT

Name
Last _____ First _____ Middle _____

Social Security No. _____ Telephone Number (____) _____

Present Address

Street Address _____ City _____ State ____ Zip Code _____

How long have you lived at this address? Since _____

Previous Address

Street Address _____ City _____ State ____ Zip Code _____

How long did you live at this address? From _____ To _____

(Please list all prior addresses at which you lived within 3 years of this Application on separate paper)

Are you a United States citizen or an alien authorized to work in the United States? Yes No

Are you over 18 years of age? Yes No

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:

(The existence of a criminal record does not constitute an automatic bar to employment.)

EMPLOYMENT DESIRED

Position(s) Desired:

Have you previously been employed by a Conservation District? Yes No (If Yes, please provide the name of the District, dates of employment and other relevant information in "EMPLOYMENT HISTORY" section.)

Have you previously applied for employment with Lancaster County Conservation District? Yes No If Yes, give dates you applied and disposition:

Status Desired: Full Time Part Time

Hours Desired: _____

EMPLOYMENT HISTORY

Starting with your current or most recent employer, please list all periods of employment, self-employment and unemployment **and** military service or unemployment:

| Employer's Name and Address | Dates of Employment | Position(s) Held | Salary/Wage | Reason For Leaving |
|---|---|----------------------|--|--------------------|
| Name: Street Address: City, State, Zip Code: Telephone Number: | Hire Date: (Month/Year) End Date: (Month/Year) | Names of Supervisors | Start: \$ _____ /wk End: \$ _____ /wk | |
| Name: Street Address: City, State, Zip Code: Telephone Number: | Hire Date: (Month/Year) End Date: (Month/Year) | Names of Supervisors | Start: \$ _____ /wk End: \$ _____ /wk | |
| Name: Street Address: City, State, Zip Code: Telephone Number: | Hire Date: (Month/Year) End Date: (Month/Year) | Names of Supervisors | Start: \$ _____ /wk End: \$ _____ /wk | |

| Employer's Name and Address | Dates of Employment | Position(s) Held | Salary/Wage | Reason For Leaving |
|---|---|-----------------------------|--|---------------------------|
| Name: Street Address: City, State, Zip Code: Telephone Number: | Hire Date: (Month/Year) End Date: (Month/Year) | Names of Supervisors | Start: \$ _____ /wk End: \$ _____ /wk | |
| Employer's Name and Address | Dates of Employment | Position(s) Held | Salary/Wage | Reason For Leaving |
| Name: Street Address: City, State, Zip Code: Telephone Number: | Hire Date: (Month/Year) End Date: Month/Year | Names of Supervisors | Start: \$ _____ /wk End: \$ _____ /wk | |

*** Please list all additional employers and requested information on separate paper.**

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

Have you ever been discharged, terminated or asked to resign from a job? Yes No If yes, explain below:

May we contact your current employer? Yes No If no, please explain below:

EDUCATION

| | Name and Address of Institution | Course of Study or Major | Years Completed | Diploma/ Degree |
|--|---------------------------------|--------------------------|-----------------|--------------------|
| *Undergraduate Degree College | | | | |
| *Graduate Degree, Professional, Business or Correspondence | | | | |
| Other | | | | |

*Please provide an official transcript(s)

Please list any additional certifications, degrees or training which you have received which may be relevant to your candidacy for employment with Lancaster County Conservation District:

PERSONAL REFERENCES

Please provide three references who are **not** previous employers or relatives:

| Name | Address | Relationship | Telephone Number | Years Known |
|------|---------|--------------|---------------------|----------------|
| | | | | |
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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 Lancaster County Conservation District shall not be liable in any respect if my employment is terminated because of false statements, answers or omissions.

I authorize Lancaster 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 Lancaster County Conservation District to investigate all statements in this Application and to secure any necessary information from employers, references, educational institutions and certifying entities. I hereby release these 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 have applied. I understand that, if employed, I will be required to complete a Federal Background Investigation questionnaire for computer security clearance purposes.

In the event of my employment with Lancaster 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 Lancaster County Conservation District remains free to terminate the employment relationship at any time, with or without cause, with or without notice.

I understand that this Application will be considered active for a period of 90 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

Lancaster 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.