

FREMONT COUNTY SOLID WASTE DISPOSAL DISTRICT

Employment Application – Please Print or Type and Complete 100% of the Document
(*submittal of a resume along with this application is highly encouraged*)

Revised: February 23, 2018

APPLICANT INFORMATION

Last Name	First	MI	Today's Date
Street Address			Apartment/Unit#
City	State		Zip Code
Phone ()	E-Mail Address		
Date Available to Start	Desired Salary		
Position Applied for			
How did you hear about the open position? _____			
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 ever been convicted of a felony? YES/NO If yes, please explain _____			

EDUCATION

High School	Address	
From	To	Did you graduate? YES/NO

College	Address	
From	To	Did you graduate? YES/NO Degree _____

Other	Address	
From	To	Did you graduate? YES/NO

DRIVERS LICENSE INFORMATION

Do you have a valid Wyoming driver's license? YES/NO

If yes,

- Please list your driver's license number: _____
- What is the type of license? _____
- Please list all endorsements _____
- Please list: (1.) the types of trucks operated, (2.) the role or conditions the trucks were operated, and (3.) the amount of time spent operating the trucks: _____

Equipment Operation Background

Please list (1.) the type of equipment/heavy equipment that you have operated, (2.) in what role or conditions the equipment was used, and (3.) the amount of time spent operating the equipment: _____

Computer Experience/Ability

Please list (1.) your computer experience, (2.) types of programs used, (3.) in what capacity the computer programs have been used, and (4.) the amount of time you have used the listed programs: _____

REFERENCES

*Please list three references for **both** the Professional and Personal*

Professional References:

Full Name Relationship
Company Phone ()
Address

Full Name Relationship
Company Phone ()
Address

Full Name Relationship
Company Phone ()
Address

Personal References:

Full Name Relationship
Company Phone ()
Address

Full Name Relationship
Company Phone ()
Address

Full Name Relationship
Company Phone ()
Address

PREVIOUS EMPLOYMENT

Please list three previous employers, starting with your present or most recent employment. Attach additional pages as necessary to represent your applicable work history in a chronological order.

Company	Phone ()	May we contact? YES/NO
Street Address		Apartment/Unit#
City	State	Zip Code
Job Title	Supervisor	
Responsibilities		
Date Hired	Date the position was left	
Reason for leaving		

Company	Phone ()	May we contact? YES/NO
Street Address		Apartment/Unit#
City	State	Zip Code
Job Title	Supervisor	
Responsibilities		
Date Hired	Date the position was left	
Reason for leaving		

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Job Title	Supervisor	
Responsibilities		
Date Hired	Date the position was left	
Reason for leaving		

MILITARY SERVICE

Branch	From	To
Rank at Discharge		Type of Discharge
If other than honorable, please 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
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