

The Skagit Conservation District is an equal opportunity employer and shall not discriminate against an employee or applicant for employment because of race, color, religion, sex, age, marital status, national origin, or physical disability and any other basis protected by statute are not factors in employment, promotion and/or compensation unless based upon a bona fide occupational qualification.

Position Applying for:

Full Name:										
	Last	First			M.I.	Date				
Address:										
	Street Address				Apartment/Unit					
	City				State	Zip Code				
Phone:		Em	ail:							
		Yes	No		Do you possess a y	alid driver's license?	Yes	No		
Are you 18 ye	ars or older?			,						
Have you appl	ied for employment at SCD before?	Yes	No	If yes, when?						
Have you ever	Have you ever worked for SCD?		No	If yes,						
•				when?						
I have read the job description and can perform the duties without an accommodation.		Yes	No	If yes,		Position?				
				explain						
Have you been convicted of a felony in the last		Yes	No	If yes,						
7 years?	_			explain						
Have you served in the Armed Forces?		Yes	No	If yes,						
•				explain						
Do you have skills or experience gained through hobbies, volunteer work, etc. relevant to the position? Have you graduated from High School or passed the GED?		Yes	No	If yes,						
				explain						
		Yes	No	If no,	-					
				explain						
We'd like to kn	ow how you heard about this position	n.								
Date you can	start if offered this position?			Startin	g salary desired if offe	red this position:	•			
							•			
If yes, may we	e contact your present employer? _	Ц	Ц	-						

Relevant Professional Certificates and/or Licenses:								
SKILLS RELATED TO THIS POSITION: LEVEL OF ABILITY AMOUNT OF EXPERIENCE								

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		EMPLOYMENT	шетог	ov.	
Boginning with your procent or m	act recent employ				at least the past 10 years, including periods of
self-employment, volunteer activity					
Company or individual Name:	illes, & O.S. Hilliar	y service. Allacir sep	arate si		cossary (attaoned).
Address:				Sur	pervisor:
Job Title:					
Summary of Responsibilities:					
,					
Dates employed					
From:	To:	Reason for leaving:			
May we contact your previous sup	orvicor for a roforon		Yes	No	Supervisor
iviay we contact your previous sup	dervisor for a referen	ice :			Phone:
Company or individual Name:					
Address:				Sup	pervisor:
Job Title:					
Summary of Responsibilities:					
Dates employed	_	5 ()			
From:	To:	Reason for leaving:	`,		
May we contact your previous sup	ervisor for a referen	nce?	<u>Yes</u>	No	Supervisor
, , , , , , , , , , , , , , , , , , ,		· ·			Phone:
Commons on in dividual Names					
Company or individual Name: Address:				Cur	non liner:
Job Title:				Sup	pervisor:
Summary of Responsibilities:					
Sufficially of Responsibilities.					
Potes and and					
Dates employed From:	To:	Reason for leaving:			
			Yes	No	Supervisor
May we contact your previous supervisor for a reference? Tes No Supervisor Supervisor Phone:					
IE AUT MEED VUUT	ITIONAL SDACE D	DI EASE ATTACH SE			(see attached at end of application)
II 100 NEED ADDI	THOUND OF AUL, F	LLAUL ATTAUTIOL	1 1/1/1/1	LOILLI	(300 attached at end of application)

REFERENCES							
						pervisors, but are knowledgeable about your character and skills related th you on a volunteer committee or project.	
Full Name:						Phone No:	
Type of reference:	Professional		Personal		Email:		
Years Acquainted:							
Full Name:						Phone No:	
Type of reference:	Professional		Personal		Email:	THORE NO.	
	Troicssional		r croonar		Liliali.		
Years Acquainted:							
Full Name:						Phone No:	
Type of reference:	Professional		Personal		Email:	3	
Years Acquainted:							
DIS	CLAIMER, R	ELEA	SE OF INF	ORMA	TION, AND	SIGNATURE	
PLEASE READ BEFORE SIGNING I certify that all statements made by me on this application are true and complete to the best of my knowledge, and that I have withheld nothing, which, if disclosed, would affect this application unfavorably. I authorize the Skagit Conservation District to contact all of my former or present employers, schools or persons named as references on this application for the purposes of verification and reference, to give any information regarding my employment or my educational record for use in determining my qualifications for this position. This may include information of a confidential or privileged nature, to include but is not limited to reviewing my personnel file, contacting any references, and/or contacting anyone else who might be familiar with my past job performance. I agree that the Skagit Conservation District and my previous employers shall not be held liable in any respect if a job offer is not extended, is withdrawn, or my employment is terminated because of false statements or omissions made by me on this application. If the Skagit Conservation District employs me, I will comply with all rules and regulations as set forth in any communication distributed to employees. In compliance with the Immigration Reform and Control Act of 1986, I understand that I will be required to provide approved documentation that verifies my right to work in the United States on my first day of employment. I am in receipt of a list of approved documents that have been supplied with this application. I further understand and agree that my employment is for no definite period and may, regardless of the date of payment of wages or salary, be terminated for any reason and at any time without previous notice. I acknowledge that I have read and understand the above statements.							
ATTACHMENTS TO APPLICATION: 1. Immigration Reform & Control Act Requirement 2. General description of conservation districts 3. Employment History continued sheet							

IMMIGRATION REFORM AND CONTROL ACT REQUIREMENT

In compliance with the Immigration Reform and Control Act of 1986, you will be required to provide approved documentation that verifies your right to work in the Untied State prior to beginning work here at this company. Please be prepared to provide any of the following documentation if you are offered and accept a position with us:

- 1. U.S. Passport
- 2. Certificate of U.S. citizenship (issued by Immigration & Naturalization Service)
- Certificate of Naturalization (issued by Immigration & Naturalization Service)
- 4. Unexpired foreign passport with unexpired endorsement authorizing employment
- 5. Resident alien card or other alien registration card with photo or other approved identifying information, which evidences employment authorization.

OR one from List A and one from List B:

List A: These establish employment authorization:

- 1. Social Security Card (unless it specified that it doesn't authorize employment)
- 2. Certificate of U.S. birth or other documentation which establishes U.S. nationality or birth
- 3. Other approved documentation

List B: These establish identity:

- 1. Driver's license or similar state I.D. card with photo or other approved identifying information
- 2. Other approved documentation of identity for applicants under age 16 or in a state which does not issue an I.D. card (other than a driver's license)

THIS VERIFICATION PROCESS IS A REQUIREMENT FOR ALL EMPLOYEES HIRED ON OR AFTER NOVEMBER 6, 1986

EMPLOYMENT HISTORY CONTINUED								
Attach this separate sheets if necessary for additional information								
Company or individual Name: Address: Job Title:	ress: Supervisor: Title:							
Summary of Responsibilities:								
Dates employed From: To: Reason for leaving:								
May we contact your previous supervisor for a reference?	Yes	No	Supervisor Phone:	()				
		_						
Company or individual Name: Address: Job Title:	ddress: Supervisor:							
Summary of Responsibilities:								
Dates employed From: To: Reason for leaving:								
May we contact your previous supervisor for a reference?	Yes □	No	Supervisor Phone:	()				
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Company or individual Name:		0						
ddress: Supervisor: Supervisor:								
Summary of Responsibilities:								
Dates employed	_	_						
From: To: Reason for leaving:	, _	N.I.						
May we contact your previous supervisor for a reference?	Yes	No	Supervisor Phone:	()				