

Application For Employment

CROOK COUNTY PARKS AND RECREATION DISTRICT IS A DRUG FREE WORK PLACE. We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital status, veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.
 THE DISTRICT DOES NOT HIRE APPLICANTS WHO MUST SMOKE WHILE ON THE JOB

(PLEASE PRINT)

Position(s) Applied For				Date of Application	
How did you learn about this position?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Walk-in	
<input type="checkbox"/> Relative		<input type="checkbox"/> Other		<input type="checkbox"/> Employment Agency	
Last Name		First Name		Middle Name	
Address – Number		Street		City	
				State	
				Zip Code	
Telephone Number				Social Security Number	

If you are under 18 years of age, can you provide required proof of your ability to work?	Yes	No
Have you ever filed an application with us before?	Yes	No
	If yes give date _____	
Have you ever been employed with us before?	Yes	No
	If yes give date _____	
Are you currently employed?	Yes	No
May we contact your current employer?	Yes	No
Are you available to work: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Shift Work <input type="checkbox"/> Temporary		
Are you prevented from lawfully being employed in this country because of Visa or Immigration Status?	Yes	No
<small><i>Proof of Citizenship or Immigration Status will be required upon employment</i></small>		
Are you currently on "lay-off" status and subject to recall?	Yes	No
Have you been convicted of a felony within the last 7 years?	Yes	No
<small><i>Conviction will not necessarily disqualify an applicant from employment</i></small>		
If yes, please explain: _____		

Crook County Parks and Recreation District

Education

Elementary School					High School				College/University (Undergraduate)				Graduate/ Professional				
School Name and Location																	
Years Completed	4	5	6	7	8	9	10	11	12	1	2	3	4	1	2	3	4
Diploma/Degree																	
Describe Course of Study																	
Describe any specialized training, Apprenticeship, skills and extra Curricular activities.																	
Describe any honors you have Received																	
State any additional information you feel may be helpful to us in considering your application																	

Indicate any foreign languages you can speak, read or write			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

<p>List professional, trade business, or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status:</p> <p>_____</p> <p>_____</p> <p>_____</p>
--

Personal References

<p>Give the name, address and telephone number of three references who are not related to you and are not previous employers</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p>
--

Have you ever had any job related training in the United States military? Yes No

If yes, please describe: _____

Are you physically or otherwise unable to perform the duties of the job for which you are applying?

Yes No

Crook County Parks and Recreation District

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap or other protected status:

Employer		Dates Employed		Work performed
		From	To	
Address				
Telephone Number		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work performed
		From	To	
Address				
Telephone Number		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work performed
		From	To	
Address				
Telephone Number		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work performed
		From	To	
Address				
Telephone Number		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason for Leaving				

Special Skills and Qualifications:

Summarize any job related skills, qualifications and experience the you have: _____

DRUG SCREENING POLICY ON APPLICATION FOR EMPLOYMENT

Crook County Parks and Recreation District consider safe work practices and the prevention of injuries a critical aspect to quality performance of duties. Crook County Parks and Recreation District recognize the prevalence of both illegal and prescription drug's in today's society and the adverse effect these drugs have on the safe work performances of people on the job. Therefore, Crook County Parks and Recreation District require all work applicants to submit to urine drug screen testing. The testing is administered and performed by qualified technologists.

Crook County Parks and Recreation District will from time to time also do random drug screens where names are drawn and the employees will be asked to report at a given time for a drug screen.

If your urine drug screen results in detection of drugs that have not been prescribed by a physician or if you refuse to test, you will not be considered for employment. Should the screen be positive, then you may reapply for employment after a 90-day waiting period. Even some prescription drugs affect the ability of people to work safely. Crook County Parks and Recreation District will attempt to accommodate such applicants as best as possible.

CONSENT FOR URINE OR BREATH ANALYSIS

I authorize Crook County Parks and Recreation District and any agent it designates to collect my urine/breath and to conduct tests for evidence of drug and alcohol usage. I understand that the results of this test may affect decisions of initial and continued employment with Crook County Parks and Recreation District.

NAME (print) _____

SIGNATURE _____

DATE _____

CONSENT TO CRIMINAL RECORDS SEARCH

Applicant hereby consents to have Crook County Parks and Recreation District investigate all criminal records in applicant's name in and criminal record data bas. Applicant is aware that information retrieved from such a search may affect the hiring decision. The signature and submitting of this consent is a requirement of the application process.

Signed this _____ day of _____ Year _____

Print Name: FIRST MIDDLE LAST

Signature

Social Security # _____ Drivers Lic. # _____ State _____

TO BE COMPLETED BY STAFF PERSON ADMINISTERING/REQUESTING CRIMINAL HISTORY SEARCH OF APPLICANT.

___ NO information discovered which could adversely affect hiring this individual.

___ YES adverse information on record which could raise significant doubt on the applicants ability to be hired.

Search completed/requested by _____(please initial)