

EMPLOYMENT RECORD

List jobs in reverse order starting with your present job. List your entire work history including volunteer, part-time, temporary, self-employment, and jobs. List each promotion as a separate job. This section must be accurate and complete. Do not substitute a resume. If more space is needed, attach additional sheets in the name format. Include your name, Social Security Number, and signature.

1. Employer: _____ Address: _____
From Mo/Yr: _____ To Mo/Yr: _____ Hrs. Per Week: _____ Your Title: _____
Last Salary: \$ _____ Supervisor: _____ May we contact? YES NO Phone: _____
Name on employment record, if different from present name: _____
Reason for leaving: _____
Duties: _____

2. Employer: _____ Address: _____
From Mo/Yr: _____ To Mo/Yr: _____ Hrs. Per Week: _____ Your Title: _____
Last Salary: \$ _____ Supervisor: _____ May we contact? YES NO Phone: _____
Name on employment record, if different from present name: _____
Reason for leaving: _____
Duties: _____

3. Employer: _____ Address: _____
From Mo/Yr: _____ To Mo/Yr: _____ Hrs. Per Week: _____ Your Title: _____
Last Salary: \$ _____ Supervisor: _____ May we contact? YES NO Phone: _____
Name on employment record, if different from present name: _____
Reason for leaving: _____
Duties: _____

4. Employer: _____ Address: _____
From Mo/Yr: _____ To Mo/Yr: _____ Hrs. Per Week: _____ Your Title: _____
Last Salary: \$ _____ Supervisor: _____ May we contact? YES NO Phone: _____
Name on employment record, if different from present name: _____
Reason for leaving: _____
Duties: _____

REFERENCES: Give names and addresses of three (3) people, not relatives or former employers, who have known you for at least one year.

| | NAME | ADDRESS | TELEPHONE NUMBER |
|----|-------|---------|------------------|
| 1. | _____ | _____ | _____ |
| 2. | _____ | _____ | _____ |
| 3. | _____ | _____ | _____ |

CERTIFICATION OF APPLICANT: I affirm, agree, and/or understand that all statements on this form are true and accurate and any misrepresentation or omission of facts may result in my being disqualified or my being discharged should I already be employed. I understand you may inquire into my background and conduct a fingerprint check. I further understand that I will be required to pass a physical after a contingent job offer has been made before beginning employment. Also, I understand that all employees of the Solid Waste Authority are employees-at-will, not contractual employees. If I have requested herein that my employer not be contacted, an offer of employment may be conditional upon acceptable information and verification from such employer prior to beginning work.

SIGNATURE _____ **DATE** _____