

EDUCATION

List any education, training and/or specialized experience (such as trade, vocational or technical school) you feel would help you perform the work and responsibilities of the position for which you are applying.

	Name of the Institution	Location (city & state)	Course of Study	Years Completed	Diploma or Degree Yes / No
High School or Equivalent					
Undergraduate College or University					
Graduate School					
Trade or Vocational School					
Trade or Vocational School					
Military					
Other					

Describe any other specialized training, apprenticeship, licenses, extra-curricular activities you feel are relevant or would help you perform the duties of the position you are applying. Please list where it was acquired.

List any other skill or qualification as they relate to this position or that you believe is relevant to this position.

Employment History

Starting with your present or most recent, list your previous employers. If more space is needed, continue in a separate sheet. You may attach a resume, but this portion of the application must be completed in full.

Last or present company		Type of Business	Title of position held	Current Salary
Street address		Phone #	Brief description of job duties	
City	State	Zip Code		
Supervisor's Name & Title				
Dates Employed (mo./yr.) From:		To:		
Reason for leaving or seeking other employment				
May we contact your current employer? [] Yes [] No				

Company		Type of Business	Title of position held	Last Salary
Street address		Phone #	Brief description of job duties	
City	State	Zip Code		
Supervisor's Name & Title				
Dates Employed (mo./yr.) From:		To:		
Reason for leaving or seeking other employment				

Company		Type of Business	Title of position held	Last Salary
Street address		Phone #	Brief description of job duties	
City	State	Zip Code		
Supervisor's Name & Title				
Dates Employed (mo./yr.) From:		To:		
Reason for leaving or seeking other employment				

Company		Type of Business	Title of position held	Last Salary
Street address		Phone #	Brief description of job duties	
City	State	Zip Code		
Supervisor's Name & Title				
Dates Employed (mo./yr.) From:		To:		
Reason for leaving or seeking other employment				

Criminal Record: (A criminal record is not an automatic bar to employment. *Do not list any arrest, charge or detention that did not result in conviction or any arrest, detention or conviction that has been judicially expunged, sealed, impounded or eradicated.*)
Have you ever been CONVICTED, pled GUILTY or NO CONTEST, or FORFEITED BOND OR BAIL for any crime other than traffic violations in the last 10 years? Yes No If yes, please explain:

VERIFICATION AND SIGNATURE:

1. I authorize the investigation of all matters which the CWCOG deems relevant to my qualifications for employment, including all information given in this application and in any attachments, supporting documents or interviews. I authorize you to request and receive such information and I release from all liability any current or former employers, other entities (schools, etc.), or persons (such as current or former supervisors, coworkers, etc.), supplying it. I also release you from all liability which might result from making the investigation.
2. I certify that all of the information given in this application and in any attachments, supporting documents or interviews are (or will be) true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission, as well as any misleading statements or omissions, generally will result in denial of employment, withdrawal of any offer of employment, or immediate termination, regardless of when and how discovered.
3. I understand that I may be required to submit to pre- or post- employment physical or other professional examinations, medical inquiries and/or urinalysis tests for the presence of drugs and/or alcohol. I agree to such examinations, inquiries and/or testing at the CWCOG's expense. I authorize release of the results to the CWCOG and their use to evaluate my suitability for employment. I also release the CWCOG from all liability arising out of or connected with any examinations, inquiries and/or testing.
4. This application will only be considered for this position and this job-opening announcement, unless otherwise notified by the CWCOG.
5. I understand and agree that if I am hired, the statements in these paragraphs will become a binding part of my employment relationship. I have read each of these statements. I have also reviewed all of the information provided in this application and in any attachments or supporting documents.

Signature _____ **Date** _____

Unsigned or incomplete applications will not be processed.

FOR INTERNAL USE ONLY

Job Title: _____ Dept./Section: _____

Date Employed: ____/____/____ Hourly Rate/Salary: \$ _____

CWCOG Director Approval Signature: _____

Notes: _____
