

LICENSES (Optional, unless required for the position for which you are now applying.)

List current licenses, certifications, or registrations required for the position for which you are applying. Indicate types, state license numbers, and expiration dates. _____

(Answer only if position requires)

Do you possess a valid driver's license? Yes No

If so, expiration date? _____ Class _____ Restrictions (if any) _____

For positions that require typing: I certify I can type at a speed of _____ WPM.

In addition to English, list other languages you are fluent in, verbal and written: _____

List any special skill you possess and/or equipment or office machines you can operate.

OTHER INFORMATION

Have you ever been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony or any lesser crime, other than a minor traffic infraction? Yes No

If yes, list all such offenses and provide date, name of court, and disposition. Omission of information may be considered cause for disqualification from the employment pre-screening process or result in termination of employment.

Have you ever been disciplined in your employment related to workplace violence? Yes No

If yes, please explain: _____

Do you presently use illegal drugs? Yes No

Have you even been employed by the Town of Pahrump? Yes No

Department: _____ Title: _____

Dates of Employment: _____ Reason for Separation: _____

Are you related to anyone currently employed by the Town of Pahrump? Yes No

If yes, person's name _____ Department: _____ Relationship: _____

APPLICANT'S NAME: _____

EMPLOYMENT HISTORY

Provide information regarding all paid, military and volunteer work which may be related to the position for which you are applying. Describe your most recent position first; then list other positions in order held, starting with the most recent. Use a separate block for each position held, even if with the same employer. Use additional sheets if necessary.

Do NOT use references such as "See Resume" in place of completing this section.

May we contact all organizations listed? Yes No *Attach a list of any exceptions with an explanation*

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Organization:		Dates		Description of duties:
		From	To	
Complete Address (Street/PO, State, City, Zip)				
Telephone Number(s)		Hourly Rate/Salary if applicable		
		Starting	Final	
Job Title	Supervisor's Name & #			
Reason for leaving:				

Please state below any other information that would be helpful in determining your qualifications for the position. You may include significant accomplishments, previous career highlights, or any other relevant information that is not requested in this employment application.

ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the lines to indicate you have read and understand each of the statements. If you have questions, contact Ryanne Gott at (775) 751-6301 or rgott@co.nye.nv.us.

_____ All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.

_____ This application is the property of the Town of Pahrump and will become part of my personnel file if I am hired.

_____ I authorize the Town of Pahrump to contact any organization or individual that I have listed on my application and/or résumé or mentioned in job interviews, and to obtain from them any relevant information regarding my previous employment, military service, criminal history, characteristics or traits necessary for job performance, or other relevant qualifications for employment and/or continued employment with the Town of Pahrump. In addition, I authorize the Town of Pahrump to conduct a background search which includes criminal history and military history. In addition, if the position for which I am applying requires driving a vehicle, I authorize the Town of Pahrump to conduct a Department of Motor Vehicles (DMV) search. If the position for which I am applying involves contact with minors or with any persons having diminished capacity to care for themselves, a search of government sex offender registries may be conducted. I further authorize the Town of Pahrump to contact any institution and/or licensing authority to verify my possession of education, licenses or certificates which may qualify me for employment with the Town of Pahrump.

_____ In exchange for the Town of Pahrump's consideration of my employment application, and/or any continued employment with the Town of Pahrump, I authorize anyone possessing this information to furnish it to the Town of Pahrump upon request, and I release the organization and all individuals providing the information or acquiring the information, including the Town of Pahrump, from all claims, liability, and damages whatsoever claimed to be related to furnishing, obtaining, or using said information. This release applies to, but is not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

_____ I further understand this consent will apply during the entire course of my employment with the Town of Pahrump should I obtain such employment. I understand and agree this consent shall remain in effect indefinitely.

_____ I hereby certify that all statements made in this application are true. I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to any employment with the Town of Pahrump. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment regardless of length of employment. I understand that neither this document nor any offer of employment from the Town of Pahrump constitutes an employment contract unless a specific contract document to that effect is executed. I agree to undergo any job-related physical examination and drug screening upon conditional offer of employment. I further understand and agree that this paragraph applies to any information supplied by me at a later date as part of this application.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge.

Signature of Applicant: _____ **Date:** _____