



JOB APPLICATION

Mid Klamath Watershed Council



APPLICANT	
NAME:	PHONE:
EMAIL ADDRESS:	
MAILING ADDRESS:	
How soon are you available for employment? <input type="checkbox"/> Immediately <input type="checkbox"/> Other _____	
Have you ever been employed at MKWC? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, date last employed? _____	
Are you over 18 years old? <input type="checkbox"/> YES <input type="checkbox"/> NO	Do you have a vehicle you can use for work if needed? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have a driver's license? <input type="checkbox"/> YES <input type="checkbox"/> NO	

POSITION APPLYING FOR	PROGRAM	COMMENTS:

WORK EXPERIENCE (START WITH MOST RECENT)					
POSITION	EMPLOYER/SUPERVISOR	FROM	TO	REASON FOR LEAVING	CAN WE CONTACT THIS EMPLOYER TO VERIFY EMPLOYMENT?

EDUCATION / TRAINING HISTORY				
COMPLETED GRADE 12 OR GED ? <input type="checkbox"/> YES <input type="checkbox"/> NO				
	NAME OF INSTITUTION	MAJOR	DEGREE/CERTIFICATE	DID YOU GRADUATE?
Business, Technical, Vocational or Military				
College or University				
College or University				

HIGHLIGHT SKILLS RELEVANT TO THE POSITION(S) SOUGHT

INTEREST IN POSITION

ANYTHING ELSE WE SHOULD KNOW ABOUT YOU?

REFERENCES (LIST AT LEAST THREE PROFESSIONAL REFERENCES)

NAME	RELATIONSHIP	PHONE NUMBER

Please feel free to attach a cover letter and resume

I understand that any omission or misrepresentation with respect to this information may be cause for denial or immediate termination of employment.

Signature

Date