



**THE LAND CONSERVANCY OF SAN LUIS OBISPO COUNTY
Employment Application Form**

**PLEASE PRINT ALL
INFORMATION REQUESTED
AND SIGN**

**MUST BE ACCOMPANIED BY
A COVER LETTER AND
RESUME**

**APPLICATION FOR EMPLOYMENT
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS**

PLEASE COMPLETE PAGES 1-4. DATE _____

Name _____

Last
First
Middle
Maiden

Present address _____

Number
Street
City
State
Zip

How long _____ Email address: _____
 Telephone () _____ - _____ Date of Birth: _____

Are you able to lift over 50 lbs repeatedly on a daily basis? No Yes

Are you capable of walking in excess of 5 miles per day with a 40 lb pack over difficult terrain? No Yes

Are you willing to undergo a pre-employment medical examination? No Yes

Do you have any previous injuries or conditions that may compromise your ability to perform the duties described in the job description? No Yes

Are you willing to apply herbicides/chemicals when required? No Yes

When are you available to start? _____ Position(s) applied for: _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (City, State)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

PLEASE PRINT ALL
INFORMATION REQUESTED
AND SIGN

MUST BE ACCOMPANIED
BY A COVER LETTER
AND RESUME

APPLICATION FOR EMPLOYMENT

DO YOU HAVE A VALID DRIVER'S LICENSE? Yes No (Please be prepared to present a DMV report prior to being hired.)

What is your means of transportation to work? _____

Driver's license
number _____ State of issue _____ Operator Commercial (CDL) Chauffeur
Expiration date _____

Have you had any accidents during the past three years? How many? _____

Have you had any moving violations during the past three years? How Many? _____

Please list two references other than relatives or previous employers.

Name _____	Name _____
Position _____	Position _____
Company _____	Company _____
Address _____	Address _____
_____	_____
Telephone () _____	Telephone () _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to list any additional information necessary to describe your full qualifications for the specific position for which you are applying. For example, include certifications, specialized training (workshops and seminars), awards, volunteer activities, etc.

**PLEASE PRINT ALL
INFORMATION REQUESTED
AND SIGN**

**MUST BE ACCOMPANIED
BY A COVER LETTER
AND RESUME**

APPLICATION FOR EMPLOYMENT

Work Experience Please list your work experience for the **past five years** beginning with your most recent job held.
If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	Your last job title:		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes	Your Last Job Title:		
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

**PLEASE PRINT ALL
INFORMATION REQUESTED
AND SIGN**

**MUST BE ACCOMPANIED
BY A COVER LETTER
AND RESUME**

APPLICATION FOR EMPLOYMENT

Work experience Please list your work experience for the **past five years** beginning with your most recent job held. If you were self-employed, give firm name. **Attach additional sheets if necessary.**

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes		Your last job title:	
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Name of employer Address City, State, Zip Code Phone number	Name of last supervisor	Employment dates	
		From	To
May we contact this employer? <input type="checkbox"/> No <input type="checkbox"/> Yes		Your last job title:	
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			

Did you complete this application yourself Yes No

If not, who did? _____

The facts set forth in my application for employment are true and complete. I understand that if employed, any false statement on this application may result in my dismissal. I further understand that this application is not and is not intended to be a contract of employment. I understand and agree that my employment will be at-will and can be terminated by either party with or without notice, for any reason or no reason. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.

Signature of Applicant

Date