



EMPLOYMENT APPLICATION

The Trustees of Reservations is an equal opportunity employer. All qualified applicants will be considered without regard to age, race, color, sex, religion, national origin, marital status, ancestry, citizenship, veteran status, sexual orientation, or physical or mental disability.

PERSONAL

LAST NAME _____ FIRST NAME _____ INITIAL _____

ADDRESS _____

TELEPHONE _____ EMAIL _____

POSITION APPLYING FOR _____

HOW DID YOU HEAR ABOUT US? WALK-IN REFERRAL WEBSITE/ADVERTISEMENT _____ OTHER
NAME

SALARY DESIRED _____

I AM AVAILABLE TO WORK FROM _____ TO _____

ARE YOU AT LEAST 18 YEARS OLD? YES NO

IF YOU ARE UNDER THE AGE OF 18 YEARS OLD, DO YOU HAVE A WORK PERMIT? YES NO

ARE YOU A CITIZEN OF THE UNITED STATES? YES NO

IF NO, WHAT IS YOUR PRESENT STATUS? _____

HAVE YOU EVER BEEN EMPLOYED WITH THE TRUSTEES OF RESERVATIONS? YES NO

IF YES, WHERE AND WHEN? _____

WORK EXPERIENCE

LIST EMPLOYMENT STARTING WITH THE MOST RECENT

EMPLOYER	JOB TITLE	DATES EMPLOYED
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

EDUCATION

LIST EDUCATION STARTING WITH HIGH SCHOOL

SCHOOL / COLLEGE

COURSE OF STUDY

DEGREE RECEIVED

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

OTHER SPECIAL SKILLS, KNOWLEDGE, OR QUALIFICATIONS

REFERENCES

PLEASE PROVIDE 1 PERSONAL AND 2 BUSINESS REFERENCES

NAME

COMPANY

TELEPHONE

RELATIONSHIP

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I AUTHORIZE YOU TO SECURE RELEVANT INFORMATION FROM REFERENCES LISTED ABOVE YES NO
AND FROM MY CURRENT EMPLOYER YES NO

STATEMENT BY APPLICANT

I AGREE THAT ANY MISREPRESENTATION OR SIGNIFICANT OMISSION BY ME ON THIS APPLICATION WILL BE SUFFICIENT GROUNDS FOR DISMISSAL. I UNDERSTAND THAT THIS APPLICATION IS NOT INTENDED TO BE AND IS NOT A CONTRACT OF EMPLOYMENT.

IF I ACCEPT AN OFFER OF EMPLOYMENT, I UNDERSTAND THE EMPLOYER MAY TERMINATE MY EMPLOYMENT AT ANY TIME, WITH OR WITHOUT CAUSE AND WITHOUT PRIOR NOTICE, UNLESS REQUIRED BY LAW.

SIGNATURE _____ DATE _____