

Mariposa County Resource Conservation District

Application for Employment

Mail or Deliver Completed Application to:

PO Box 2403
Mariposa, CA 95338

Email Application to: mariposacountyrcd@gmail.com

INSTRUCTIONS: All applications must be typed or printed legibly in ink. All documents submitted become the property of Mariposa County RCD and will not be returned. Make copies of any information you submit and wish to keep.

Position applied for: _____

Name: _____
Last First Middle Initial

Mailing Address: _____
Street or PO Box City Zip Code

Telephone Number: _____

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

If yes, please give license number: _____

As an adult, have you ever been convicted of a felony? Yes No

If yes, please indicate nature of offense, when, where and disposition of case:

Please indicate skills/experience with any of the following software programs:

Windows MS Publisher MS Office

MS Word MS Outlook MS Excel

MS Powerpoint Adobe Acrobat Other

GIS _____

Proficiency in use of office equipment :

Copier Printers Multi-line Phone system

Adding machine Fax Other

*Please include employment history
and attach your resume*

Please provide last 5 years employment history to current.

Period of Employment: From: ___/___/___ To: ___/___/___ Total ___ Yrs. ___ Mo. <input type="radio"/> Full Time <input type="radio"/> Part Time Hrs. Per Week: _____ Final Salary: _____	Job Title & Most Important Duties Performed Title: _____ No. Supervised: _____ Duties: _____	Name & Address of Employer Immediate Supervisor: Telephone #: Reason for Leaving:
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PRIVACY STATEMENT AND CERTIFICATE OF APPLICANT (Please read carefully before signing.)

I understand that the information I provide on this form will be used to determine whether I meet the requirements for this examination only and may serve as the basis for arriving at a final rating. I also understand and agree that providing the requested information is voluntary and that omission or distortion of any item may result in my qualifications not receiving full consideration, may disqualify me from participating further in the examination process or may result in my termination from employment. I understand that my employment is contingent upon verification of my U.S. citizenship or legal right to remain permanently in the United States. I further understand that my employment may be contingent on passing a physical examination and providing proof of legal minimum age that may be required by certain positions.

Signature: _____

Date: _____