



PO Box 1166, Worland WY 82401

Office 307-347-4268 Fax 307-347-8944

EMPLOYMENT APPLICATION

Prospective employees will receive consideration without discrimination because of race, creed, color, sex, age, national origin, handicap or veteran status.

Position Desired _____

Form with fields: Name, Address, Phone, Date of Birth, Sex, and Are you over 18?

EMPLOYMENT/EXPERIENCE (Start with most recent)

Employment record form 1: Dates Employed, Employer, Address, Reason for leaving, Position & Duties

Employment record form 2: Dates Employed, Employer, Address, Reason for leaving, Position & Duties

Employment record form 3: Dates Employed, Employer, Address, Reason for leaving, Position & Duties

DRIVER'S LICENSE: State _____ Number _____ Class _____ CDL Ends _____ Expires _____

Specialized Training, Skills, Professional Licenses or Certifications: _____

Are you willing and able to travel throughout Wyoming? _____ Yes _____ No

Do you have any physical condition which may limit your ability to perform the job for which you are applying? _____ Yes _____ No

If "Yes" please describe _____

IN CASE OF EMERGENCY, NOTIFY:

Name/Address: _____

Phone: _____

I understand that, if necessary for employment in a specific position, I may be required to have a physical examination, submit to a drug test, or provide evidence of citizenship.

I authorize you to make such investigations and inquiries of my employment history and other related matters as may be necessary in arriving at an employment decision. I certify that answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application may result in discharge. I understand also, that I am required to abide by all rules and regulations of the employer.

Signature _____ Date _____