

Lafayette Co SWCD
120 W 19th St Higginsville
660-584-8732 x3

Applicant Information

Full Name: _____ Date: __
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ *City State ZIP Code*

Phone: _____ Email: _____

Date Available: _____ Social Security No.: _____ Desired Salary: \$ _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

If yes, explain: _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: _____
Company: _____ Phone: _____
Address: _____

Full Name: _____ Relationship: __
Company: _____ Phone: __
Address: _____

Previous Employment

Company: _____ Phone: __
Address: _____ Supervisor: __
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: __

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: __
Address: _____ Supervisor: __
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: __

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: __
Address: _____ Supervisor: __
Job Title: _____ Starting Salary: \$ _____ Ending Salary: \$ _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: __

May we contact your previous supervisor for a reference? YES NO

Physical Record

Can you perform the essential functions of the position that you are applying for? YES NO

How did you learn of this position?

Describe your agricultural experience:

Other related experience:

Write one paragraph explaining why you would like to work for the Soil and Water Conservation District.

Disclaimer and Signature

I certify the statements made in this application are correct and complete and, if employed, understand that any false or omitted information in this application or its supporting documents will be sufficient grounds for immediate termination.

Signature: _____

Date: __

The Soil and Water Conservation District is an Equal Opportunity Employer.