## TURLOCK MOSQUITO ABATEMENT DISTRICT APPLICATION FOR EMPLOYMENT

## PLEASE PRINT CLEARLY, FILL OUT FORMS COMPLETLY, SIGN AND DATE

It is our	policy to comply with all o	applicable state	and federal laws p	orohibiting di	iscrimination in empl	oyment based o	n race, age,	
color, se	ex, religion, national origii	n, disability or o	ther protected clas	ssification.				
Name _	ame Date							
Address	i							
	street	city		state	zip			
Telepho	ne number ()		Message Phon	e ()				
Email A	ddress:							
Do you	have a valid CA Driver's li	cense?	-					
Are you	over 18 years old?   Yes	s 🗆 No						
Are you	authorized to work in the	U.S. on an unr	estricted basis?	Yes 🗆 N	0			
POSIT	IONS APPLIED FOR							
1.			2					
What tv	pe of employment will yo	ou accept? (circl	e one) Full Time	Part-time	Temporary			
-	· vill you be available for wo				. ,			
	willing to work overtime							
Do you	presently have any contra need reasonable accomm riefly describe or contact	odations to par		-		ipany? 🗆 Yes	□ No	
DO NO	OT ANSWER THE FOLLOW	ING QUESTION	UNLESS YOU ARE			AND HAVE THOR	OUGHLY READ	
	able to perform the esse st the functions that cann							
EDUCA	ATION							
			NI A R & F	O LOCATIO	M.	DIPLO	D40 /	
	EDUCATION			& LOCATIOI SCHOOL	V	DIPLO	-	
	High School							
	College/Univ.							
	College/ Univ.							
	Other Training/ Education							

## WORK HISTORY

## May we contact your present employer? ☐ Yes ☐ No

Most Recent Employ	Address			Telephone				
Date Started	Starting Salary: \$	Pe	er	Starting Position				
Date Left	Salary on Leaving: \$	Pe	er	Position on Leaving				
Name and Title of Supervisor								
Description of Duties	5		Reason for Leaving					
Previous Employer		Address			Telephone			
Date Started	Starting Salary: \$	Pe	er	Starting Position				
Date Left	Salary on Leaving: \$	Pe	er	Position on Leaving				
Name and Title of Su	pervisor							
Description of Duties				Reason for Leaving				
Previous Employer		Address			Telephone			
Date Started	Starting Salary: \$	Pe	er	Starting Position				
Date Left	Salary on Leaving: \$	Pe	er	Position on Leaving				
Name and Title of Su	pervisor							
Description of Duties	5			Reason for Leaving				
Previous Employer		Address			Telephone			
Date Started	Starting Salary: \$	Pe	er	Starting Position				
Date Left	Salary on Leaving: \$	Pe	er	Position on Leaving				
Name and Title of Su	pervisor							
Description of Duties				Reason for Leaving				
n addition to your wo	ork history what other ex	xperiences, sl	kills or qua	alifications would espec	cially fit you for work with	our con		

REFERENCES:	Name persons, not related to you	, that you have known for on	e year.
NAME	ADDRESS	PHONE	YRS KNOWN
Each applicant may consideration for e	be asked to provide additional informati mployment.	on beyond that requested on this t	form in the event of future
employed; false sta any and all inform	certify that the facts contained herein are atements will be grounds for dismissal. It ation concerning my suitability for empl ing the same. I understand that my empl	authorize investigation of all stater oyment, and release all parties fr	ments and the references listed to give rom liability for any damage that may

Applicant's Signature \_\_\_\_\_