



Human Resource Office  
101 Ute Road  
Meeker, CO 81641  
Email: cathy@ERBMrec.com

## APPLICATION FOR EMPLOYMENT An Equal Opportunity Employer

Eastern Rio Blanco Metropolitan Recreation and Park District is dedicated to the principles of equal employment opportunity. We prohibit unlawful discrimination against applicants and employees on the basis of age 40 and over, race, sex, color, creed, religion, national origin, ancestry, disability, sexual orientation, transgender status, veteran status, genetic information, or any other applicable status protected by state or local law.

PERSONAL INFORMATION				
<b>Date Submitted:</b>				
<b>Name</b>	First	Middle Initial	Last	
<b>Mailing Address</b>	Street/PO Box	City	State	Zip
<b>Contact Information</b>	Home Phone Number	Cell/Message Phone Number		
	E-mail Address	Emergency Contact Name and Phone Number		
<b>Other Information</b>	Are you 18 years of age or older? Yes No		If No, are you at least 15 years of age? Yes No	
	No (If you are hired, you may be required to submit proof of age)			
	If hired, can you furnish proof you are eligible to work in the U.S? Yes No			

EMPLOYMENT DESIRED						
<b>Position Applied For:</b>			<b>Date Available:</b>			
<i>If you are applying for multiple positions, list position titles below:</i>						
2. Position Applied For:			4. Position Applied For:			
3. Position Applied For:			5. Position Applied For:			
How did you first hear about the position?		ERBM Website	Herald Times	CPRA	NRPA	Posted at a District Facility
Other (be specific):						
<b>Are you seeking:</b>	<b>Full-Time</b>	<b>Part-Time Employment</b>				
Can you work night?	Yes	No	Can you work weekends and holidays?		Yes No	
Can you work split shifts?	Yes	No				
Have you previously been employed with the District?	Yes	No				
If yes, complete the following:	Dates of Employment:		Position Held:			
	Supervisor:		Dept/Location:			
If employed, do you expect to engage in any additional business or employment outside of the District?		Yes	No			
<b>For Driving Jobs Only</b>	Does the position you are applying for require you to drive?		Yes	No	Unknown	
	If "Yes", complete this section: Do you have a valid driver's license?		Yes	No		
	Driver's License Number:		Class of License:			
	State Licensed In:		Expiration Date:			
	Have you had your driver's license suspended or revoked in the last four years?		Yes	No		
	Have you received any traffic violations in the last four years that resulted in 6 or more total points against your license? Yes No If Yes, give details:					

# EDUCATION

	Name and Location of School	Course of Study	# Of Years Completed	List Degree/Diploma Completed
High School/GED			9    10    11    12	
Undergraduate College				
Vocational				
Graduate/Other				

List any skills or additional training you possess that may relate to the position for which you are applying.

Do you hold any professional licenses or certifications? If so, please list.

Are you currently CPR certified?    Yes    No    Certification Expiration Date:

# EMPLOYMENT HISTORY

List name of employers in consecutive order with present or most recent employer listed first. Account for all periods of time including military service and any periods of unemployment. If self-employed, give firm name and supply business references. **Note: A job may be contingent upon acceptable references from current and former employers.** (Please attach additional page if needed.) **You must complete this section even if attaching a resume.**

1.	Employer	Start Date	End Date	Summarize Work Performed /Duties
	Job Title			
	Employer City and State			
	Supervisor Name and Title			
	May we contact this employer?    Yes    No			
	Supervisor Phone Number and Email Address	Reason for leaving		
2.	Employer	Start Date	End Date	Summarize Work Performed /Duties
	Job Title			
	Employer City and State			
	Supervisor Name and Title			
	May we contact this employer?    Yes    No			
	Supervisor Phone Number and Email Address	Reason for leaving		
3.	Employer	Start Date	End Date	Summarize Work Performed /Duties
	Job Title			
	Employer City and State			
	Supervisor Name and Title			
	May we contact this employer?    Yes    No			
	Supervisor Phone Number and Email Address	Reason for leaving		
4.	Employer	Start Date	End Date	Summarize Work Performed /Duties
	Job Title			
	Employer City and State			
	Supervisor Name and Title			
	May we contact this employer?    Yes    No			
	Supervisor Phone Number and Email Address	Reason for leaving		

## PROFESSIONAL REFERENCES

List below three persons who have knowledge of your work performance, preferably within the last 5 years, and are not relatives or friends:

<b>1.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship
<b>2.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship
<b>3.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship
<b>4.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship

## PERSONAL REFERENCES

**Required only for those applicants that cannot provide a Professional Reference as they do not yet have an employment history.** List below two persons not related to you who have knowledge of your character preferably within the last 5 years

<b>1.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship
<b>2.</b>	Name	Occupation
	Company Name	Address
	Telephone Number	E-Mail Address
	Years Acquainted	Relationship

## GENERAL INFORMATION

<b>1.</b>	Have you worked or attended school under any other name? If Yes, give name(s):	Yes	No
<b>2.</b>	Are you currently employed?	Yes	No
	May we contact you current employer?	Yes	No
<b>3.</b>	Have you ever been fired from a job or asked to resign?	Yes	No
<b>4.</b>	Are you able to perform the essential functions and duties of the job for which you are applying with or without accommodation?	With	Without
<b>5.</b>	Consistent attendance and punctuality are essential requirements of every job with ERBM Recreation and Park District. Is there anything which would interfere with your regular attendance and punctuality if you are offered the position?	Yes	No

## AFFIDAVIT, CONSENT AND RELEASE

### PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

**By signing, I am authorizing the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employer, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.**

I understand that:

1. I will be required to successfully pass an alcohol and/or drug screening examination. I hereby consent to a pre and/or post employment alcohol and/or drug screen as a condition of employment.
2. I will be required to successfully pass a complete pre-employment background and/or motor vehicle screening before and/or after an offer of employment is extended.

**I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE EXECUTIVE DIRECTOR OR BOARD OF DIRECTORS HAS THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIC PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE EXECUTIVE DIRECTOR OR BOARD OF DIRECTORS AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF EASTERN RIO BLANCO METROPOLITAN RECREATION AND PARK DISTRICT. I HAVE THE RIGHT TO END MY WORK RELATIONSHIP WITH THE DISTRICT, WITH OR WITHOUT ADVANCE NOTICE OR CAUSE. THE DISTRICT HAS THE SAME RIGHT.**

*I have read, understand, and by my signature consent to these statements.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This application for employment will remain active for a limited time. Ask Human Resources for details.