



Goshen County Weed & Pest

4522 State Highway 26/85, PO Box 757

Torrington, WY 82240

(307) 532-3713

gocoweeds@gmail.com

Employment Application

Applicant Information

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

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email: _____

Date Available: _____ Position Applied for: _____

Driver's License #: _____ Expiration Date: _____ State of Issue: _____

| | | | | | |
|---|------------------------------|-----------------------------|--|------------------------------|-----------------------------|
| Are you a citizen of the United States? | YES <input type="checkbox"/> | NO <input type="checkbox"/> | If no, are you authorized to work in the U.S.? | YES <input type="checkbox"/> | NO <input type="checkbox"/> |
| Have you ever worked for this company? | <input type="checkbox"/> | <input type="checkbox"/> | If yes, when? | _____ | |
| Have you ever been convicted of a felony? | <input type="checkbox"/> | <input type="checkbox"/> | | | |

If yes, explain: _____

Education

High School: _____

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

College: _____

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

Other: _____

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

References

Please list two professional references. Local, non-relative references preferred.

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

Other Information

Include any other relevant information such as job-related special qualifications and skills

Driving Record

Final determination of employment will be contingent upon applicant providing a driving record to GCWP. The driving record must be obtained within 30 days prior to date of employment.

Driving records are available in person at the local Department of Motor Vehicles for \$5.00. For more information visit the Wyoming Department of Transportation website: http://dot.state.wy.us/home/driver_license_records

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

I authorize Goshen County Weed and Pest to investigate my background and qualifications for purposes of evaluating the accuracy of this application and qualifications for the position for which I am applying. I understand I may withhold my permission and in doing so, no investigation will be done and my application for employment will not be processed further.

Signature: _____ Date: _____