

Note: We comply with ADA and consider reasonable accommodation measures that may be necessary for eligible applicants and employees to perform essential function. Hire may be subject to passing a medical examination and skill and agility test.

EMPLOYMENT REFERENCES:

CURRENT OR MOST RECENT EMPLOYER

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Company/Employer:	City	State	Phone Number		
Are you currently working for this employer?	Yes	No	If yes, may we contact them?	Yes	No
Date Employed:	From: _____	To: _____	Job Title: _____		
Duties: _____					
Salary: _____ Reason for Leaving: _____					

SECOND MOST RECENT EMPLOYER:

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Company/Employer:	City	State	Phone Number		
Are you currently working for this employer?	Yes	No	If yes, may we contact them?	Yes	No
Date Employed:	From: _____	To: _____	Job Title: _____		
Duties: _____					
Salary: _____ Reason for Leaving: _____					

THIRD MOST RECENT EMPLOYER:

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Company/Employer:	City	State	Phone Number		
Are you currently working for this employer?	Yes	No	If yes, may we contact them?	Yes	No
Date Employed:	From: _____	To: _____	Job Title: _____		
Duties: _____					
Salary: _____ Reason for Leaving: _____					

You may attach an additional sheet to include any other related experience.

AFFIDAVIT

I certify that the answers given by me to the foregoing questions and statements are true and correct without consequential omissions of any kind. I authorize employers, companies, schools, or persons named above to give any information regarding my employment, character, and qualifications. I hereby release said employers, companies, schools, or persons from all liability for any damage for issuing this information. I understand and agree that any misleading or incorrect statements or omissions may render this application void, and if employed, I agree this could be cause for termination. As an applicant for employment with the Feather river Recreation and Park District, I understand that I must comply with the Employee Fingerprinting Policy, submit to a pre-employment physical/drug examination as directed by the District, and complete a criminal background questionnaire. Further, I understand and agree that my employment is for no definite period and may, regardless of the date of payment of my wages and salary, be terminated at any time without previous notice.

Signature: _____