How to contact Employment Services:

GENERAL: 719-269-9050



How to apply: FAX: 719-276-7001

EMAIL: hr@fsd.co MAIL: EMPLOYMENT SERVICES 107 BERRY PARKWAY CAÑON CITY, CO 81212

Fremont Sanitation District APPLICATION FOR EMPLOYMENT

The Fremont Sanitation District provides Equal Employment Opportunity and considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, marital, veteran or any other legally protected status. Position Applying For: Date You Can Start: Application Date: First Name, MI: Social Security #: Are you at least 18 years of Last Name: age? ☐ Yes ☐ No Home Address: State: City: Zip: Mailing Address: City: State: Zip: Home Phone: Can you provide the Fremont Sanitation District with either proof of United States citizenship or authorization to work in the United States? Cell Phone: Have you ever been convicted of a felony? ☐ Yes ☐ No If yes, list dates, offenses, and disposition:___ Within the last 7 years have you had any driving violations? □ No If yes, list dates, offenses, and disposition: (convictions are not an automatic disqualification from employment) Have you ever applied here before? ☐ Yes Do you have any relatives currently working for the Fremont Sanitation District? If yes, please give name: Position: Name and Address of School Course of Years Diploma/Degree/Certificate? Year Completed Study Completed Yes/No Type High School College Post Graduate Technical/Other Please list any specialized training, apprenticeships or other skills that you have received: I am proficient in the following software:

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Typing Speed: wpm Driver's Lice		nse Number: State:		:	
Commercial License:	Yes ☐ No List All Ende	orsements:			
Please indicate how you learned of this position:		☐ Newspaper Ad	d ☐ Walk-ii	n	☐ Employee Referral
☐ Friend ☐ Employment Agency ☐ Other (de:		escribe):			
Employment Expe	erience (this section	n must be comp	olete despite the	e possibility of an attac	<u>hed resume)</u>
Start with your present	t or most recent job.	Include any	y military ser	vice assignments.	Attach additional
Employment Experien	ce pages as necess	sary.			
Current or Most Rece	May w	e contact you	ur current employei	r? 🗌 Yes 🗌 No	
Employer Name and Address:		Dates Employed:		Work Performed:	
		From	То		
Phone:		Salary Information:		1	
Your Title:	Your Supervisor:	Starting	Final		
Reason for Leaving:				# Hours per Week:	
Employer Name and Address:		Dates Employed:		Work Performed:	
		From	То		
Phone:		Salary Information:			
Your Title:	Your Supervisor:	Starting	Final		
Reason for Leaving:				# Hours per Week:	
Employer Name and Address:		Dates Employed:		Work Performed:	
		From	То		
Phone:		Salary Information:		_	
Your Title:	Your Supervisor:	Starting	Final		
Reason for Leaving:				# Hours per Week:	

Job Application Agreement and Certification (Read Before Signing)

I certify that all information given on this Application is correct. I understand that any falsification, misrepresentation, or willful omissions may constitute grounds for termination. I understand that Fremont Sanitation District will obtain information from others concerning this Application. I release Fremont Sanitation District, all of its employees and elected officials, or any other persons providing information concerning me, from any liability or any claim of any kind related to any inquiry or response to any inquiry concerning this Application or my prior education, work experience, and performance.

I also understand that the use of illegal drugs is prohibited during my employment. Fremont Sanitation District requires all employees to submit to drug testing prior to employment as well as during the course of employment. I am willing to submit to all drug testing.

I understand that prior to being offered employment with Fremont Sanitation District, I may be requested to take an employment examination. In the event I have a disability which will affect my ability to take the test, I will so inform Fremont Sanitation District, prior to the administration of the test, so that reasonable accommodations can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. Fremont Sanitation District reserves the right to require medical documentation concerning the need for the accommodation.

I understand that nothing contained in this Application or in the granting of an interview is intended to create an employment contract between Fremont Sanitation District and myself, for either employment or for the providing of any benefit. No promises regarding employment or regarding the way in which I will be treated if I am employed have been made to me, and I understand that no such promise, covenant, or guarantee is binding upon Fremont Sanitation District unless made in writing.

I acknowledge that all employment with the Fremont Sanitation District is at-will and of an indefinite duration, and that either the employee or the Fremont Sanitation District may separate employment at any time, with or without notice, and for any reason.

Signature	Date
Print Name	
Professional References (please provide 3 professional refere	nces)
Name:	Phone Number: