



RIO LINDA ELVERTA RECREATION AND PARK DISTRICT
 810 OAK LANE, RIO LINDA CA 95673
 P/ (916) 991-5929 F/(916) 991-2892
www.RLEParks.org

APPLICATION FOR EMPLOYMENT

Position(s): _____ Date: _____
 Name: _____
 Mailing Address: _____ City: _____
 State: _____ Zip: _____ Phone: _____
 Email: _____ Driver's License: _____

GENERAL ENFORMATION:

1. Are you over 18? ___ Yes ___ No
2. Have you ever worked for RLERPD before? ___ Yes ___ No
3. If yes, list the position and supervisor: _____
4. Are you a citizen or national of the United States? ___ Yes ___ No
5. If no, are you legally authorized to work in the U.S.? ___ Yes ___ No
6. Are you a military veteran? ___ Yes ___ No

EDUCATION:

Name of School and Location	Dates	Subjects	Diploma

REFERENCES: (provide 3 references we may contact)

Name	Phone	Relationship

SPECIALIZED SKILLS AND TRAINING:

List any achievements or activities that you consider relevant to your activity to perform the job for which you are applying such as certificates, awards, volunteer positions, etc.

EMPLOYMENT HISTORY:

Provide the required information on the recent positions you have held. Start with your present or last job. If additional space is needed, continue on a separate piece of paper. Put a check mark next to any employer that you would **not** want us to contact.

EMPLOYER: _____ FROM: _____ TO: _____

SUPERVISOR NAME: _____ PHONE: _____

CITY/STATE: _____ JOB TITLE: _____

DUTIES: _____

EMPLOYER: _____ FROM: _____ TO: _____

SUPERVISOR NAME: _____ PHONE: _____

CITY/STATE: _____ JOB TITLE: _____

DUTIES: _____

EMPLOYER: _____ FROM: _____ TO: _____

SUPERVISOR NAME: _____ PHONE: _____

CITY/STATE: _____ JOB TITLE: _____

DUTIES: _____

CERTIFICATION AND SIGNATURE:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

SIGNATURE: _____ DATE: _____

PRINT NAME: _____