



Gardnerville Ranchos General Improvement District

EMPLOYMENT APPLICATION

An Equal Opportunity Employer

If you believe you require an accommodation during the selection process, please contact us to make appropriate arrangements.

Name _____ Date _____

Address _____

City _____ State _____ Zip Code _____

Email address: _____

Telephone(s) Home () Cell () Work ()

Position Applied for _____

How did you hear about this position? ☐ Advertisement ☐ Walk-In ☐ Referral (by whom?) _____

☐ Other (explain) _____

If offered employment, when will you be available to begin? _____

What type of employment will you accept? ☐ Full-Time ☐ Part-Time ☐ Temporary

Will you be available for shift work? ☐ Yes ☐ No

Will you be available to work weekends and/or holidays if necessary?..... ☐ Yes ☐ No

Have you been given a job description or had the requirements of the job explained to you?..... ☐ Yes ☐ No

Do you understand the job requirements?..... ☐ Yes ☐ No

Can you perform the essential functions of this job with or without reasonable accommodation?... ☐ Yes ☐ No

To qualify for employment, applicants must be at least 18 years of age unless otherwise specified in the job announcement. If offered employment, can you furnish proof of age?..... ☐ Yes ☐ No

After an offer of employment, can you submit verification of your legal right to work in the United States? ☐ Yes ☐ No

List other names, if any, you have used. _____

EDUCATION RECORD

Did you graduate from high school or receive a GED certificate? ☐ Yes ☐ No

School Name	Location	Hours Earned	Diploma, Degree, or Certificate	Major Field of Study
Business/Technical/Vocational 1.				
2.				
College/University (Undergraduate) 1.				
2.				
Graduate School				

Reason for Leaving: _____

Reason for Leaving: _____

Please state below any other information that would be helpful in determining your qualifications for this position. You may include significant accomplishments, previous career highlights, or any other relevant information that is not requested in this employment application.

ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the lines to indicate you have read and understand each of the statements. If you have any questions, contact _____, (Human Resources Department).

- _____ All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.
- _____ This application is the property of **[Employer]** and will become part of my personnel file if I am hired.
- _____ I authorize **[Employer]** to conduct a comprehensive review of my background which may include verification of employment, educational background, criminal/court history records check; credit report check; military records check; drug test for safety sensitive positions; character references, and other publicly available information deemed to be job related. In addition, if the position for which I am applying requires driving a vehicle, I authorize **[Employer]** to conduct a Department of Motor Vehicles (DMV) search. If the position for which I am applying involves contact with minors or with any persons having diminished capacity to care for themselves, a search of government sex offender registries may be conducted. I further authorize **[Employer]** to contact any institution and/or licensing authority to verify my possession of education, licenses, and/or certificates which may qualify me for employment.
- _____ In exchange for **[Employer's]** consideration of my employment application, and/or any continued employment with **[Employer]**, I authorize anyone possessing information to furnish it to **[Employer]** upon request, and I release the organizations and all individuals providing the information or acquiring the information, including **[Employer]**, from all claims, liability, and damages whatsoever claimed to be related to furnishing, obtaining, or using said information. This release applies to, but is not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.
- _____ I further understand this consent will apply during the entire course of my employment with **[Employer]** should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely.
- _____ I hereby certify that all statements made in this application are true. I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to any employment with **[Employer]**. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment regardless of length of employment. I understand that neither this document nor any offer of employment from **[Employer]** constitutes an employment contract unless a specific contract document to that effect is executed. I agree to undergo any job-related drug screening and physical examination upon conditional offer of employment. I understand that **[Employer]** is not requesting genetic information from the drug screening or the physical examination and that the person administering the examination should not provide genetic information to **[Employer]**. I further understand and agree that this paragraph applies to any information supplied by me at a later date as part of this application.
- _____ Per NRS 281.060 (2), I opt to exercise my rights by voluntarily attaching a copy of my DD214. NRS 281.060(2) states preference must be given, *if qualifications of applicants are equal*: a) first, to an honorably discharged military personnel of the United States who is a citizen of Nevada; and b) second, to other citizens of Nevada.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge.

Signature of Applicant _____

Date _____