

CONSOLIDATED AGENCIES OF HUMAN SERVICES

P.O. Box 331 / 924 "5th" St

HAWTHORNE, NEVADA 89415

Phone (775) 945-2471 Fax (775) 945-2499

POSITION OPEN UNTIL FILLED

**PLEASE ATTACH A LIST OF 3 PERSONAL REFERENCES WITH
TELEPHONE NUMBERS**

INSTRUCTIONS: This application must be filled out in detail, with all sections completed and mailed or delivered to the CAHS Office by the date specified above. Failure to complete the application in full will result in rejection of the application. You may use and attach supplementary information. All submission materials will be retained.

Name: _____

Home Phone: _____

Work Phone: _____

Address: _____
Street and Number City State Zip

Mailing Address: _____

Position Title: _____
Job you are applying for

1. Have you ever been convicted of any offense, other than traffic citations:

() Yes () No If "yes" give date and place of each offense, the specific charge, the date, county/city or court of conviction and the fine or sentence received, on separate sheet. (a conviction is not necessarily a barrier to employment.)

2. I will accept employment that is:

() Full-Time

() Part-Time (less than 8 hours per day.)

() Temporary (less than 6 months)

3. High School Education - Name and Location: _____

Circle grade completed: 9,10,11,12 Did you graduate: () Yes () No GED Completed? () Yes () No

Names of colleges/universities	Dates attended	Course of Study / Major	Year Completed	Degree Conferred
Vocational /Trade School		Course studied		Certificate awarded

List any current licenses, certifications or registrations that are pertinent for the position you are applying. Include your current driver's license: _____

List any special skills you possess relevant to this position. List any equipment, office machines, or computer programs you can operate: _____

List any foreign language(s) you can speak, read or write: _____

EXPERIENCE Begin with your most recent job. List each job separately. List all jobs, and any periods of unemployment, in the last 5 years. Include military service. Also, list any jobs you held more than 5 years ago, which relates to the job for which you are applying, and indicate the number of hours per week that you worked. Also list any volunteer experience, which relates to the job for which you are applying. Please note: Unless you indicate otherwise, you former employer(s) may be contacted.

EMPLOYMENT HISTORY

Present or Last Employer: _____ Position: _____

Address: _____ City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Telephone #: _____

From Mo/Yr: _____ To Mo/Yr: _____ Hours Per Week: _____

Duties: _____

Reason For Leaving: _____

Previous Employer: _____ Position: _____

Address: _____ City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Telephone #: _____

From Mo/Yr: _____ To Mo/Yr: _____ Hours Per Week: _____

Duties: _____

Reason For Leaving: _____

Previous Employer: _____ Position: _____

Address: _____ City: _____ State: _____ Zip: _____

Supervisor's Name: _____ Telephone #: _____

From Mo/Yr: _____ To Mo/Yr: _____ Hours Per Week: _____

Duties: _____

Reason For Leaving: _____

--IMPORTANT--

1. I declare that any statement in this application or information provided is true and complete. I understand that if I provide false information, I may subject myself to the penalty provisions of NRS 284.430.
2. I hereby authorize all my former employers to furnish any and all information they have concerning me, whether or not such information is on their records, and I release them from any and all liabilities or damages arising by furnishing such information.

() I request that you do not contact my present employer unless necessary to determine my qualifications for the position.

NAME: (Please print) _____

SIGNATURE : _____

DATE _____

POLICY STATEMENT

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA.