## NEW CASTLE CONSERVATION DISTRICT 2430 OLD COUNTY ROAD NEWARK, DELAWARE 19702



POSITION APPLIED F	OR:							
LOCATION APPLIED	FOR:							
KENT	NEW CAST	LE	SUSSEX	CITY OF	WILN	MINGTON		
TYPES OF EMPLOYM CONTRACTU		EPT: CONTRACTI	J <b>al Part</b>	г-ТІМЕ Т	EMP	ORARY		
PERSONAL INFORM	ATION:							
NAME:								
ADDRESS:								
PHONE: HOME/CELL			WORK					
MAY WE CALL YOU	AT WORK:	YES	]	NO				
IF REQUIRED: DRIVER'S LICENSE NUMBER: PRESENT/PAST CONSERVATION DISTRICT EMPLOYEE: YES NO  EDUCATION/TRAINING								
SCHOOL NAME	LOCATION	LOCATION DATES AT		TENDED MAJOR/MINOR		TYPE OF DEGREE RECEIVED		
PROFESSIONAL LICE	NSES, CERTIFICATIO	NS, AND/OF	REGISTE	RATIONS:				
LICENSE/CERTIFICATION/REGISTRATION TYPE			ISSUED BY/NUMBER			EXPIRATION DATE		
OTHER JOB-RELATED	TRAINING:							
COURSE TITLE			TRAINING PROVIDER			DATES ATTENDED		
			<b>-</b>		<b>-</b>			

## **EMPLOYMENT HISTORY**

The information you provide, in addition to education, will be used to determine if you meet the minimum job qualifications. Give a complete record including full-time work, part-time work, military service, and volunteer experience. \*Attached additional pages as needed.

EMPLOYER NAME:					
ADDRESS:					
SUPERVISOR NAME:	PHONE:				
<ul><li>JOB TITLE:</li><li>EMPLOYEMENT DATES: FROM:</li><li>JOB DUTIES:</li></ul>	HOURS PER WEEK: TO:				
EMPLOYER NAME:					
ADDRESS:					
SUPERVISOR NAME:	PHONE:				
<ul><li>JOB TITLE:</li><li>EMPLOYEMENT DATES: FROM:</li><li>JOB DUTIES:</li></ul>	HOURS PER WEEK: TO:				
EMPLOYER NAME:					
ADDRESS:					
SUPERVISOR NAME:	PHONE:				
<ul><li> JOB TITLE:</li><li> EMPLOYEMENT DATES: FROM:</li><li> JOB DUTIES:</li></ul>	HOURS PER WEEK: TO:				

## CERTIFICATION

BEFORE SIGNING, READ THE FOLLOWING STATEMENTS CAREFULLY:

THIS APPLICATION IS TRUE AND COMPLETE; ANY FALSE INFORMATION MAY BE CAUSE FOR REJECTION OF APPLICATION. I AUTHORIZE THE RELEASE OF ANY INFORMATION FROM MY PREVIOUS EMPLOYERS OR CHARACTER REFERENCES.

I CERTIFY THAT IF I AM A MALE, BORN AFTER JANUARY 1, 1960, IF REQUIRED TO REGISTER, I HAVE REGISTERED FOR SELECTIVE SERVICE. I UNDERSTAND THAT I MAY BE REQUIRED TO DOCUMENT REGISTRATION.

APPLICANTS MUST BE LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES. THE CONSERVATION DISTRICT PARTICIPATES IN THE FEDERAL E-VERIFY SYSTEM TO CONFIRM YOU ARE AUTHORIZED TO WORK IN THE U.S. I UNDERSTAND THAT IF I AM HIRED BY THE KENT OR NEW CASTLE CONSERVATION DISTRICT, THE DISTRICT SHALL REQUIRE VERIFICATION OF MY IDENTITY, VALIDATING I AM LAWFULLY PERMITTED TO WORK IN THE UNITED STATES BEYOND A TEMPORARY PERIOD WITHOUT EMPLOYMENT — BASED SPONSORSHIP.

A	PPI	<b>ICA</b>	NT	SIG	NA	TURE:

DATE:

Accommodations are available for applicants with disabilities in all phases of the application and employment process. Call (302) 739-5458 to request an auxiliary aid or service. TDD users should call the Delaware Relay Service Number 1-800-232-5460 for assistance.

Conservation District Revision: 3/20/2025

Form: Employment Application - NCCD