

Beginning with most recent position, please describe in detail each specific job (especially experience which qualifies you for position sought). It is very important that you describe your duties and responsibilities of each position held.

A résumé of your background may be attached.

Company Name		Company Address		Type of Business	
Starting Date (Month/Year)	Leaving Date (Month/Year)	Approx. Starting Base Salary	Final Base Salary	Starting Position Title	Present or last Position
Name of Immediate Supervisor		Supervisors Position Title		Phone Number	

Explain reason for leaving or wanting to leave _____

Please describe your duties and responsibilities _____

May we contact your present employer now? _____ Yes _____ No. If no, when? _____

Company Name		Company Address		Type of Business	
Starting Date (Month/Year)	Leaving Date (Month/Year)	Approx. Starting Base Salary	Final Base Salary	Starting Position Title	Present or last Position
Name of Immediate Supervisor		Supervisors Position Title		Phone Number	

Explain reason for leaving or wanting to leave _____

Please describe your duties and responsibilities _____

Company Name		Company Address		Type of Business	
Starting Date (Month/Year)	Leaving Date (Month/Year)	Approx. Starting Base Salary	Final Base Salary	Starting Position Title	Present or last Position
Name of Immediate Supervisor		Supervisors Position Title		Phone Number	

Explain reason for leaving or wanting to leave _____

Please describe your duties and responsibilities _____

ATTACH ADDITIONAL SHEETS FOR WORK HISTORY IF NEEDED

MILITARY EXPERIENCE

Entry Date _____ Separation Date _____ Branch of service _____

Rank at Separation _____ Present Selective Service Classification _____

(explain service duties here) _____

LICENSES OR CERTIFICATION

If a license or other authorizations to practice a trade or profession is relevant for the position for which you are applying complete the following:

Name of Trade/Profession	License Number	Granted by (Licensing agency)	Address of Licensing Agency

I hereby certify, under penalty of law, that the information contained on this form is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time show any misrepresentation or falsification, my application will be rejected, my name will be removed from the eligible list and I will be dismissed from service. I authorize the Valley View Ferry Authority to make all necessary investigations to verify the information contained herein and to verify my transcripts as needed with the university or college concerning my achieved education. I understand my application will be held on file for one year. I understand I will not be notified that my application has expired. I also understand that when my application has expired it will be removed from the Valley View Ferry Authority files along with all other data relating to my application and it is my sole responsibility to resubmit my application after one year if I want to continue to be considered for employment.

Date _____ Signature of Applicant _____