



RUTLAND COUNTY
 SOLID WASTE DISTRICT
 REDUCE • REUSE • RECYCLE • COMPOST

2 Greens Hill Lane
 Rutland, Vermont 05701

EMPLOYMENT APPLICATION

PERSONAL IF HANDWRITTEN, PLEASE PRINT CAREFULLY **Date:**

First Name:	Middle:	Last:	Other Legal Name(s):
Address:		City/State/Zip:	
Home Phone:		Cell Phone:	
Email Address:			
Do you have means of reliable transportation to get to work: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Minimum Salary Expected: \$			
Are you legally eligible for employment in this country: <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Proof of U.S. citizenship or immigration status will be required upon employment)</i>			

EMPLOYMENT DATA

Are you seeking: <input type="checkbox"/> Temporary <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Internship			
Why are you seeking employment at this time?			
Are you available to work overtime: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Are you able to travel if a job requires it?			
What position(s) are you applying for:			
Are you currently employed: <input type="checkbox"/> Yes <input type="checkbox"/> No			
If currently employed, when would you be available for work:			
Have you ever been employed by the Rutland County Solid Waste District (RCSWD): <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, when:			
Where did you hear about this position:			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> RCSWD Employee Provide Employee Name:	<input type="checkbox"/> Job Service	
<input type="checkbox"/> Job Posting	<input type="checkbox"/> Department of Labor	<input type="checkbox"/> Publication	
<input type="checkbox"/> College	<input type="checkbox"/> Newspaper	<input type="checkbox"/> Other:	

Applications will be kept active for 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time

EDUCATION

	Name and Address	# of Years Attended	Graduate Yes/No	Major Course and Degree
High School				
College				
Graduate School				
Certifications:				
Other training or skills:				
MILITARY SERVICE				
Are you a veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give dates of service: From: _____ To: _____				
List any special skills or training:				

List any professional, trade, business or civic activities and office held. <i>You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or disability or any other protected status.</i>
Indicate any foreign languages you can speak, read and/or write.

PLEASE COMPLETE ALL ITEMS EVEN IF YOU PROVIDED US WITH A RESUME

WORK HISTORY

Please list your last 3 employers, starting with the most recent.

EMPLOYER:	Dates Employed	
Telephone #:	From:	To:
Address:	Supervisor:	
Title/Position:		
Work Performed:	May we contact this employer: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Reason for Leaving:		

EMPLOYER:	Dates Employed	
Telephone #:	From:	To:
Address:	Supervisor:	
Title/Position:		
Work Performed:		
Reason for Leaving:	May we contact this employer: <input type="checkbox"/> Yes <input type="checkbox"/> No	
EMPLOYER:	Dates Employed	
Telephone #:	From:	To:
Address:	Supervisor:	
Title/Position:		
Work Performed:		
Reason for Leaving:	May we contact this employer: <input type="checkbox"/> Yes <input type="checkbox"/> No	

List three persons who **are not** relatives, employers or otherwise mentioned in this application.

REFERENCES

Name:	Phone #'s:
How do you know this person:	
Name:	Phone #'s:
How do you know this person:	
Name:	Phone #'s:
How do you know this person:	

***Please read the following paragraphs and initial before you sign this application. Your electronic initials and electronic signature constitutes your agreement thereto in return for the consideration of your application.**

I AUTHORIZE THE RUTLAND COUNTY SOLID WASTE DISTRICT (the "DISTRICT") TO VERIFY ALL STATEMENTS CONTAINED ON THIS APPLICATION. I ALSO AUTHORIZE THE DISTRICT TO CONTACT MY PRESENT EMPLOYER, PAST EMPLOYERS, REFERENCES, SCHOOLS AND ORGANIZATIONS. I AUTHORIZE ANY PERSON, SCHOOL, EMPLOYER, OR ORGANIZATION TO PROVIDE THE DISTRICT WITH INFORMATION AND OPINION AND RELEASE THE COMPANY AND ALL SUCH SOURCES FROM ANY LIABILITY ARISING FROM THE SOLICITATION OR USE OF THE INFORMATION.

INITIALS: _____

BY MY SIGNATURE AND INITIALS BELOW, I STATE THAT THE INFORMATION PROVIDED ON THIS EMPLOYMENT APPLICATION AND ON MY RÉSUMÉ, IF ANY, IS TRUE AND COMPLETE AND THAT THERE IS NO INFORMATION WHICH I HAVE OMITTED OR FAILED TO INCLUDE.

INITIALS: _____

I AGREE THAT ANY FALSE INFORMATION OR OMISSIONS, INTENTIONAL OR UNINTENTIONAL, ON THIS EMPLOYMENT APPLICATION WILL DISQUALIFY ME FROM CONSIDERATION FROM EMPLOYMENT AND, IF EMPLOYED, MAY RESULT IN IMMEDIATE DISCHARGE.

INITIALS: _____

I UNDERSTAND THAT THIS EMPLOYMENT APPLICATION AND ANY OTHER DOCUMENTS OF THE DISTRICT ARE NOT CONTRACTS OF EMPLOYMENT. MY EMPLOYMENT AT THE DISTRICT WILL BE AT-WILL. I UNDERSTAND THAT I CAN BE DISCHARGED BY THE DISTRICT AT ANY TIME AND FOR ANY REASON WITH OR WITHOUT PRIOR NOTICE OR WARNING, AND NO REPRESENTATIVE OF THE DISTRICT HAS THE AUTHORITY TO OFFER OR TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING.

INITIALS: _____

Date

Signature

**The Rutland County Solid Waste District is an
Equal Opportunity Employer
and Veteran Friendly.**