



IVGID Human Resources
893 Southwood Boulevard
Incline Village, NV 89451
(775) 832-1100/(775) 832-1359 fax
jobs@yourtahoeplace.com

EMPLOYMENT APPLICATION An Equal Opportunity Employer

| |
|--------------------------|
| District Use Only |
| Date: _____ |
| Appl #: _____ |

If you have a disability and believe you require accommodation for the disability during the selection process, please contact us to make appropriate arrangements.

Name: _____
First Middle Initial Last

Mailing Address: _____
City, State, Zip - Country

Phone: () _____ **Alt Phone:** () _____

Email Address: _____

Have you ever been employed by IVGID? Yes No

If Yes, what department? _____ Date(s) Employed: _____

List any relatives currently employed by IVGID: _____

Position(s) Applied For:

1) _____ 2) _____ 3) _____

Position Status: Full-Time Part-Time Seasonal On-Call Temporary

Please note any days or hours you cannot or prefer not to work: _____ Date available: _____

Do you understand the requirements of the job(s) for which you have applied? Yes No

Can you perform the requirements of the job(s) with or without reasonable accommodations? Yes No

Certain positions require that applicants meet age requirements: Are you at least 18 years of age?
Yes No

How did you hear about us?

| | | | | |
|-----------|--------------------------|-----------------|---------------------|--------------------------|
| Newspaper | <input type="checkbox"/> | Please specify: | Friend/Acquaintance | <input type="checkbox"/> |
| Employee | <input type="checkbox"/> | Please specify: | Previous Employee | <input type="checkbox"/> |
| Internet | <input type="checkbox"/> | Please specify: | Job Fair | <input type="checkbox"/> |
| Other | <input type="checkbox"/> | Please specify: | Please specify: | |

EDUCATION RECORDDid you graduate from high school or receive a GED certificate? Yes No

| School Name College/Technical/Vocational/Other | Location | Credits Earned | Diploma, Degree or Certificate | Major / Field of Study |
|---|----------|-------------------|-----------------------------------|------------------------|
| | | | | |
| | | | | |
| | | | | |

For positions that require a high school diploma or GED or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.

CERTIFICATION AND LICENSES

List driver's license and other current licenses, certifications or registrations required for the position(s) for which you are applying.

| Type | Date Issued | Date Expires | Entity |
|------|-------------|--------------|--------|
| | | | |
| | | | |
| | | | |

SKILLS

List any special skills you possess and/or equipment or office machines you can operate (Example: bartending, cashiering, electrical, accounting, management/supervisory, skiing, golfing, etc).

| | | |
|-------------------|--|-------------|
| Foreign Language | Read <input type="checkbox"/> Write <input type="checkbox"/> Speak <input type="checkbox"/> | Proficiency |
| Computer Skills | | Proficiency |
| Additional Skills | | Proficiency |

OTHER INFORMATIONHave you ever been disciplined in your employment related to workplace violence? Yes No

If yes, please explain: _____

Do you presently use illegal drugs? Yes No

EMPLOYMENT HISTORY

List employers, starting with the most recent (including all paid military and volunteer work), for the past 10 years. Use a separate block for each position. DO NOT use references such as "See Resume" in place of completing this section.

May we contact all employers listed? Yes No (Attach a list of any exceptions with an explanation.)

Employer: _____ Position/Job Title: _____

Address: _____

Related Duties: _____

Reason for leaving: _____

Employer: _____ Position/Job Title: _____

Address: _____

Related Duties: _____

Reason for leaving: _____

Employer: _____ Position/Job Title: _____

Address: _____

Related Duties: _____

Reason for leaving: _____

Employer: _____ Position/Job Title: _____

Address: _____

Related Duties: _____

Reason for leaving: _____

Employer: _____ Position/Job Title: _____

Address: _____

Related Duties: _____

Reason for leaving: _____

ADDITIONAL INFORMATION

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 information that is not included in this employment application.

REFERENCES

Please list references that are job related (i.e. co-workers), not related to you.

| Name | Relationship / Occupation | Telephone | Years Known |
|------|---------------------------|-----------|-------------|
| | | | |
| | | | |
| | | | |

ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the boxes to indicate you have read and understand each of the statements. If you have questions, contact Human Resources.

- Following an offer of employment, I will submit verification of my legal right to work in the United States.
- All offers of employment and all information regarding compensation and other terms and conditions of employment may be made in writing for specific positions.
- Employment will be *at-will* unless specifically stated to be otherwise. *At-will* means IVGID may terminate my employment at any time with no advance notice and for any reason or no reason.
- This application is the property of IVGID, and will become part of my personnel file if I am hired.

PLEASE READ CAREFULLY

I authorize the Incline Village General Improvement District (IVGID) to contact any employer or individual that I have listed on my employment application, resume and or mentioned in job interviews, to obtain from them any relevant information regarding my previous employment, military service, criminal history, characteristics or traits, or other qualifications for employment and/or continued employment with IVGID. I further authorize IVGID to contact any entity for job-related information regarding education, licenses, and/or certificates which I may currently hold or may have held in the past.

In exchange for IVGID's consideration of my employment application, and/or my continued employment with IVGID, if any, I authorize anyone possessing this information to furnish it to IVGID upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including IVGID, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but 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 course of my employment with IVGID, should I obtain such employment. I understand and agree this consent shall remain in effect indefinitely.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand I am required to abide by all rules and regulations of IVGID.

Signature of Applicant: _____ **Date:** _____