



APPLICATION FOR EMPLOYMENT

Town of Dinosaur
PO Box 238
Dinosaur, CO 801610
Phone 970-374-2286
Dinosaur1@townofdinosaur.org

The Town of Dinosaur is an equal opportunity employer. We encourage all persons to file applications with us and we do not discriminate on the basis of race, color, age, religion, sex, sexual orientation, gender identity, national origin, marital status, genetic information, veteran status, and mental or physical disability.

APPLICANT INFORMATION										
Last Name				First				M.I.	Date	
Street Address							Apartment/Unit #			
City				State				ZIP		
Phone				E-mail Address						
Date Available				Position Applied for				Desired Salary		
Circle Type of Employment		Full Time		Part Time		Temporary		Seasonal		
Less than a year at current address provide previous address										
Are you a citizen of the United States?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If no, are you authorized to work in the U.S.?		YES <input type="checkbox"/> NO <input type="checkbox"/>	
Have you worked for Dinosaur before?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If so, when?			
Have you ever been convicted of a felony?			YES <input type="checkbox"/>		NO <input type="checkbox"/>		If yes, explain			
EDUCATION										
CIRCLE HIGHEST GRADE COMPLETED: 9 10 11 12 13 14 15 16 17 18										
High School/GED				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
College				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			
Other				Address						
From		To		Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree			

Special Skills, Training or Relevant Experience

List Certifications:

List any Training:

List any Skills that pertain to the position you have applied for:

REFERENCES

Please list three professional references.

Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			
Full Name		Relationship	
Company		Phone	
Address			

PREVIOUS EMPLOYMENT

Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

Previous Employment Continued			
Company		Phone	
Address		Supervisor	
Job Title	Starting Salary	\$	Ending Salary \$
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>			

MILITARY SERVICE	
Branch	From To
Rank at Discharge	Type of Discharge
If other than honorable, explain	

All Applicants who will drive or operate Town vehicles or machinery must complete this section of the application

Experience & Qualifications – Driver			
State	Licenses No.	Type	Expiration Date

CLASS OF EQUIPMENT, IF APPLICABLE		
Type of Equipment	Dates: To & From	Approximate # of Miles (Total)

DRIVING INCIDENTS / ACCIDENTS , LAST 3 YEARS			
Dates	Nature of Incident / Accident	Fatalities	Injuries

TRAFFIC CONVICTIONS & FORFEITURES FOR THE PAST 3 YEARS (OTHER THAN PARKING VIOLATIONS)			
Location	Date	Charge	Penalty

ATTACH SHEET IF MORE SPACE IS NEEDED	
Have you ever been denied a license, permit or privilege to operate a motor vehicle?	Yes____ No____
Has any license, permit or privilege ever been suspended or revoked?	Yes____ No____

DISCLAIMER AND SIGNATURE	
I certify that my answers are true and complete to the best of my knowledge.	
All job offers can be contingent upon the successful completion of a background process, which may include a police records check, credit check, medical examination and a drug screen.	
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.	
Signature	Date

EEOC – Self-Identification Survey

In order to comply with Federal Regulations in the area of Equal Employment Opportunity, Town of Dinosaur requests that Applicants provide the following information. This is Voluntary. The information will be treated confidentially and will not result in adverse treatment of any individual. This information may be provided to State and Federal Regulatory Agencies.

Position Applying For:

Date:

Last Name:

First Name & Middle Initial:

Address:

City/State/Zip:

Gender:

Age:

Ethnic Background

- ☐ White – Not of Hispanic origin, all persons having origins in any of the original people of Europe, North Africa or the Middle East.
- ☐ Black – Not of Hispanic origin, all persons having origins in any of the Black racial groups of Africa.
- ☐ Hispanic – All persons of Mexican, Puerto Rican, Cuban, Central or South American, OT other Spanish culture of origin, regardless of race.
- ☐ Asian or Pacific Islander – All persons having origins in any of the original peoples of the Far East, Southeast.
- ☐ Asia, the Indian Subcontinent – All persons from China, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ American Indian or Alaskan Native – All persons having origins in any of the original peoples of North America and who maintain cultural identification through affiliation or community recognition.
- ☐ Other – List Sources _____

Veteran Status

- ☐ Vietnam Era Veteran - Defined as a veteran who (a) served on active duty in the Republic of Vietnam between February 28, 1961 and May 7, 1975, or (b) served on active duty for a period of more than 180 days, any part of which occurred between August 5, 1964 and May 7, 1975, and was discharged or released there from with other than a dishonorable discharge, or (c) was discharged or released from active duty for a service-connected disability if any part of his or her active duty was performed between August 5, 1964 and May 7, 1975.
- ☐ Other Eligible Veteran - Defined as any veteran who served in a “war” declared by Congress, in a campaign or on an expedition for which a campaign badge, a service medal, or an expeditionary medal has been awarded.

☐ I do not wish to Self-Identify

How did you find out about our opening? ☐ Current Employee ☐ Newspaper Ad ☐ Company Website
☐ State Employment Service ☐ Other _____

Print Name: _____

Signature: _____

Date: _____