

Please give accurate, complete full-time and part-time employment records. Start with present or most recent employer.

Employment

1	Company Name	Telephone
	Address	Employed Month/Year From To
	Name of Supervisor	Weekly Pay Rate Start Last
	State Job duties and Describe your work	Reason for leaving

2	Company Name	Telephone
	Address	Employed Month/Year From To
	Name of Supervisor	Weekly Pay Rate Start Last
	State Job duties and Describe your work	Reason for leaving

3	Company Name	Telephone
	Address	Employed Month/Year From To
	Name of Supervisor	Weekly Pay Rate Start Last
	State Job duties and Describe your work	Reason for leaving

4	Company Name	Telephone
	Address	Employed Month/Year From To
	Name of Supervisor	Weekly Pay Rate Start Last
	State Job duties and Describe your work	Reason for leaving

5	Company Name	Telephone
	Address	Employed Month/Year From To
	Name of Supervisor	Weekly Pay Rate Start Last
	State Job duties and Describe your work	Reason for leaving

We need at least ten (10) years of employment history, if additional space is needed to list those previous employers, you will need to ask for instructions.

We may contact the employers listed above unless you indicate those you do not want us to contact.
Employer Number(s) _____ Reason _____

Please complete this Section if you served in the US Armed Forces		
M I L I T A R Y	Describe your duties and any special training	Branch of Service
		Period of Active duty Month/Year From To
		Rank of Discharge
		Date of Final Discharge

Are you over 18 years of age? Yes _____ No _____
Are you a US Citizen? Yes _____ No _____

Due to FAA Regulations:

Have you been convicted of a crime in the past ten years, excluding misdemeanors and summary offenses, which has not been annulled, expunged or sealed by a court?

Yes _____ No _____ If yes, describe in full _____

Have you received Worker's Compensation or Disability Income Payments? Yes _____ No _____
If yes, describe _____

Do you have any physical defects which would keep you from performing certain jobs?

Yes _____ No _____

If yes, describe limitation(s) _____

The information provided in this Application for Employment is true, correct, and complete, if employed, any misstatement or omission of fact on this application may result in my dismissal.

I understand that nothing contained in this application or in the granting of an interview creates a contract between Tri-State Airport Authority and myself either for employment or for the providing of any benefits. No promises regarding employment have been made to me. If an employment relationship is established, I acknowledge that no consideration has been to Tri-State Airport Authority for my employment other than my services, and I understand both that I have the right to terminate my employment at any time and that Tri-State Airport Authority has the same right.

Date

Signature