



Cache Mosquito Abatement District Application for Employment

Position: Unmanned Aircraft System Intern

PERSONAL INFORMATION

FULL NAME: _____ **DATE:** _____
 First Middle Last

ADDRESS: _____
 Street Address Apt/Suite

 City State Zip Code

E-MAIL: _____ **PHONE:** _____

DATE AVAILABLE: _____ **DESIRED PAY:** \$ _____ PER HOUR

EMPLOYMENT ELIGIBILITY

ARE YOU LEGALLY ELIGIBLE TO WORK IN THE U.S? YES NO

EDUCATION

HIGH SCHOOL: _____

CITY / STATE: _____

FROM: _____ **TO:** _____

GRADUATE? YES NO

COLLEGE: _____

CITY / STATE: _____

FROM: _____ **TO:** _____

GRADUATE? YES NO **DEGREE:** _____

PREVIOUS EMPLOYMENT

EMPLOYER 1: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____

RESPONSIBILITIES: _____

EMPLOYED FROM: _____ TO: _____

REASON FOR LEAVING: _____

EMPLOYER 2: _____
Company / Individual

E-MAIL: _____ PHONE: _____

ADDRESS: _____
Street Address Apt/Suite

City State Zip Code

STARTING PAY: \$ _____ HOUR SALARY ENDING PAY: \$ _____ HOUR SALARY

JOB TITLE: _____

RESPONSIBILITIES: _____

EMPLOYED FROM: _____ TO: _____

REASON FOR LEAVING: _____

PROFESSIONAL REFERENCES

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL or PHONE: _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL or PHONE: _____

FULL NAME: _____ **RELATIONSHIP:** _____
First Last

COMPANY: _____ **TITLE:** _____

E-MAIL or PHONE: _____

MILITARY SERVICE

ARE YOU A VETERAN? YES NO. **BRANCH:** _____

RANK AT DISCHARGE: _____ **TYPE OF DISCHARGE:** _____

SERVED FROM: _____ **TO:** _____

I, the Applicant, certify that my answers are true and honest to the best of my knowledge. If this application leads to my eventual employment, I understand that any false or misleading information in my application or interview may result in my employment being terminated.

SIGNATURE _____ **DATE** _____

PRINT NAME _____