



# APPLICATION FOR EMPLOYMENT

Nampa Highway District No. 1 is an Equal Opportunity Employer

## SECTION I – INSTRUCTIONS/CERTIFICATION

### INSTRUCTIONS TO APPLICANT:

1. Complete all Sections of this Application.
2. Provide accurate and complete answers.
3. Print neatly, except where signature is required.
4. If you do not have enough space, provide additional information on extra pages, and attach them to this Application.
5. A resumé may be attached, if so desired.
6. When complete, mail or deliver this Application to:
 

Nampa Highway District No. 1  
4507 12<sup>th</sup> Avenue Road  
Nampa, Idaho 83686

### CERTIFICATION:

I certify that I have fully read and completed all Sections of this Application, that the information provided is true and complete to the best of my knowledge. I understand that if any of the information provided is found to be untruthful or misleading, this Application may be rejected, I may be removed from further consideration for

employment, or my employment may be terminated.

I further understand and agree that, if hired, my employment is for no definite period and either Nampa Highway District No. 1 or I may terminate our relationship at will, and that this employment application does not constitute an employment contract.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

## SECTION II – APPLICANT INFORMATION

### PERSONAL INFORMATION

Name: \_\_\_\_\_  
*Last*
*First*
*Middle*
*Other Names Used*

Address: \_\_\_\_\_  
*Street*
*Apt. No.*
*City*
*State*
*Zip Code*

Telephone(s): \_\_\_\_\_  
*Home*
*Cell*
*Message*

Email Address: \_\_\_\_\_

Are you attaching a resumé?  Yes  No

Are you legally eligible to work in the United States? *(Federal Law requires proof of identity and employment authorization for all new employees)*  Yes  No

Are you related by blood or marriage to any person now employed by Nampa Highway District No. 1?  
 No  Yes *(list name and relationship to you):* \_\_\_\_\_

### POSITION APPLYING FOR

Job Title: \_\_\_\_\_

Available Start Date: \_\_\_\_\_

- Check which you are available for:
- Full Time  Days
- Part Time  Nights
- Seasonal

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## EDUCATION/TRAINING

<b>High School:</b>	<i>Name</i>	<i>Location</i>	
	<i>Diploma, Degree &amp; Major</i>		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>College:</b>	<i>Name</i>	<i>Location</i>	<i>Dates Attended (From/To)</i>
	<i>Diploma, Degree &amp; Major</i>		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Other:</b> <i>(Business, Vocational, Military)</i>	<i>Name</i>	<i>Location</i>	<i>Dates Attended (From/To)</i>
	<i>Diploma, Degree &amp; Major</i>		Did you graduate? <input type="checkbox"/> Yes <input type="checkbox"/> No

## EMPLOYMENT HISTORY

Start with most recent. List employment in reverse chronological order to age 18. Exclude part time positions held while obtaining higher education. Attach additional sheets as needed.

<b>Current Employer</b>		
<i>Name:</i>	<i>Phone Number:</i>	
<i>Address:</i>		
<i>Start Date:</i>	<i>End Date:</i>	<i>Final Pay Rate:</i>
<i>Position Held:</i>	<i>Supervisor's Name:</i>	
<i>Primary Duties:</i>		
<i>Reason for Leaving:</i>		

<b>Next Previous Employer</b>		
<i>Name:</i>	<i>Phone Number:</i>	
<i>Address:</i>		
<i>Start Date:</i>	<i>End Date:</i>	<i>Final Pay Rate:</i>
<i>Position Held:</i>	<i>Supervisor's Name:</i>	
<i>Primary Duties:</i>		
<i>Reason for Leaving:</i>		

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Next Previous Employer		
<i>Name:</i>		<i>Phone Number:</i>
<i>Address:</i>		
<i>Start Date:</i>	<i>End Date:</i>	<i>Final Pay Rate:</i>
<i>Position Held:</i>		<i>Supervisor's Name:</i>
<i>Primary Duties:</i>		
<i>Reason for Leaving:</i>		

Next Previous Employer		
<i>Name:</i>		<i>Phone Number:</i>
<i>Address:</i>		
<i>Start Date:</i>	<i>End Date:</i>	<i>Final Pay Rate:</i>
<i>Position Held:</i>		<i>Supervisor's Name:</i>
<i>Primary Duties:</i>		
<i>Reason for Leaving:</i>		

Next Previous Employer		
<i>Name:</i>		<i>Phone Number:</i>
<i>Address:</i>		
<i>Start Date:</i>	<i>End Date:</i>	<i>Final Pay Rate:</i>
<i>Position Held:</i>		<i>Supervisor's Name:</i>
<i>Primary Duties:</i>		
<i>Reason for Leaving:</i>		

# APPLICATION FOR EMPLOYMENT

## TECHNOLOGY SKILLS

Indicate your level of proficiency with the following:

MS Office       High    Rudimentary    None  
MS Word         High    Rudimentary    None  
MS Excell       High    Rudimentary    None  
MS PowerPoint  High    Rudimentary    None  
Scanner         High    Rudimentary    None  
Copier          High    Rudimentary    None  
Fax              High    Rudimentary    None  
Phone System    High    Rudimentary    None

Email usage       High    Rudimentary    None  
Internet Skills    High    Rudimentary    None

Describe any other software you are proficient with:

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## LICENSES/CERTIFICATES

Do you have a valid Driver's License?

No     Yes, State: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

List any other Professional Licenses or Certificates Held:

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Do you have a valid Commercial Driver's License?

No     Yes, State: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Class: \_\_\_\_\_

Endorsement(s): \_\_\_\_\_

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## PERSONAL REFERENCES

Provide three (3) personal references who are not related to you by blood or marriage:

Name	Address	City	State	Zip	Phone Number

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## SECTION III – VETERAN’S PREFERENCE

Per Idaho Code, Title 65, Chapter 5, Nampa Highway District No. 1 will afford a preference to employment of veterans. In the event of equal qualifications and experience between candidates for an available position, a veteran who qualifies will be preferred. For terms and qualifications, see Idaho Code Title 65, Chapter 5, and 5 U.S.C. § 2108.

Do you claim Veteran’s Preference?  No (*Skip the following, and proceed to Section IV*)  
 Yes (*Complete the following*)

Attach a copy of your Report of Separation (Form DD-214). Veteran’s Preference will not be considered without it.

Check which of the following apply:

- I have a service-connected disability of 10% or more
- I am the spouse of an eligible disabled veteran, who has a service-connected disability
- I am the widow or widower of an eligible veteran and have remained unmarried
- I do not meet any of the three categories above, but I served on active duty in the armed forces of the United States for a period of more than one-hundred eighty (180) days and was honorably discharged

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## SECTION IV – EMPLOYER DECLARATIONS

1. It is the policy of the Nampa Highway District No. 1 to provide equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, gender or age (unless a bona fide job requirement) or the presence of any disability. Reasonable accommodations will be made for disabled persons.
2. If offered employment, the offer is contingent on passing a pre-employment drug screen and a pre-employment physical if required. By signing this Application, the applicant agrees to submit to a pre-employment drug screening and pre-employment physical upon receipt of a verbal offer of employment. Failure to pass the drug screen or to meet the physical requirements of the job will result in withdrawal of the employment offer.
3. Nothing contained in this Application or conveyed during any interview is intended to create an employment contract, implied or explicit, between the Nampa Highway District No. 1 and the applicant.
4. The applicant acknowledges that he/she has reviewed the essential job functions from the job description, and is able to do them with or without reasonable accommodation.
5. If offered employment, as a condition of employment, the applicant will be required to submit proof of identity and legal right to work in the United States on or before the first day of employment.
6. If the position applied for requires driving in the course of work, the applicant will be required to possess a current and valid Idaho Driver’s License or a current and valid Idaho Commercial Driver’s License, depending on the type of equipment to be driven. The applicant may also be required to provide a copy of his/her official driving record and proof of insurance. Any offer of employment is contingent on the ability of the employee to be covered by the Nampa Highway District No. 1 auto insurance, if required for the position.

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## SECTION V – RELEASE OF PERSONAL INFORMATION

You must complete the below authorization to be considered for employment. We will not, however, contact your present employer if you do not so wish.

May we contact your present employer?  Yes  
 No

### AUTHORIZATION FOR RELEASE OF PERSONAL INFORMATION

As an applicant for employment with the Nampa Highway District No. 1, I do hereby authorize a review of and full disclosure of all records or information concerning myself to any duly authorized agent of the Nampa Highway District No. 1, whether the said records are of a public, private, or confidential nature.

The intent of this authorization is to give my consent for full and complete disclosure of all records and information of educational institutions, employment and pre-employment records, including background reports, efficiency ratings, complaints or grievances filed by or against me, either criminal or civil, in which I have, or have had any interest or involvement.

I understand that any information obtained during any personal history background investigation which is developed directly or indirectly, in whole or in part, upon this authorization will be considered in determining my suitability for employment by the Nampa Highway District No. 1. I hereby agree that any person(s) or entities who may furnish such information concerning me shall not be held liable for providing this information; and I do hereby release said person(s) and entities from any and all liability which may be incurred as a result of furnishing such information.

I further authorize that a photocopy of this signed release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature.

\_\_\_\_\_  
*Applicant Signature*

\_\_\_\_\_  
*Witness Signature*

\_\_\_\_\_  
*Applicant Printed Name*

\_\_\_\_\_  
*Witness Printed Name*

\_\_\_\_\_  
*Previous Name(s) of Applicant*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Previous Name(s) of Applicant*

\_\_\_\_\_  
*Applicant Phone Number*

\_\_\_\_\_  
*Applicant Date of Birth*

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## SECTION VI – DEMOGRAPHIC INFORMATION

What is the name of the position you are applying for? \_\_\_\_\_

What is the date of this application? \_\_\_\_\_

Your decision whether to answer the remaining questions is *voluntary*. We ask these questions for statistical purposes only, and any answers you give will *not* be considered for hiring. Upon receipt of the Application, this page will be removed from the package and filed separately.

What is your gender?  Male  
 Female

What is your race/ethnicity?  White  Hispanic  Asian  Black/African American  
 Native American  Other

What is your age? \_\_\_\_\_

Are you disabled?  Yes  
 No

How did you hear about this job announcement? \_\_\_\_\_  
\_\_\_\_\_