

Copper Mountain Consolidated Metropolitan District Employment Application

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, sexual orientation, gender identity, genetic information, religion, national origin, disability or other protected classifications.

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions <u>must</u> be answered. Please email completed application with other requested materials to employment@coppermetro.org

Position applying for:											
PERSONAL DATA											
Name (last, first, middle))										
Street Address and/or Ma	ailing Addres	SS			City				State		Zip
Home Telephone Number	er		Business Telephone Number Cellular Telephone Number								
Date you can start			Salary Desired			Do you have a High School Diploma or GED? Yes No					
Drivers License #			State			Exp Date					
POSITION INFORMATION											
Are you authorized to we	ork in the U.S	S. on an unrestricted	basis?					Υe	es	N	No
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes No If yes, explain:											
Have you been told the essential functions of the job or have you viewed a copy of the job description listing the essential functions of the job? Yes \(\subseteq \text{No} \subseteq \											
Can you perform these essential functions of the job with or without reasonable accommodation? Yes No											
QUALIFICATIONS Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degree, vocational or technical programs, and military training.											
		School Na	Name Degree				Address/City/State				
School											
School											
Other											
SPECIAL SKILLS List any special skills or experience that you feel would help you in the position that you are applying for (leadership, organizations/teams, etc.)										zations/teams, etc.)	
REFERENCES Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.											
Name			Address/City/State					Pł	none		Relationship

WORK HISTORY Start with your present or most recent employ	ment and work ba	ack. Use separate sheet if necess	sary. (INCLUDE PAID AND UNPAID POSITIONS)			
Job Title #1	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's N	ame	Phone Number			
City	State		Zip			
Duties:	•					
Reason for Leaving		Starting Salary	Ending Salary			
May we contact your present employer?	Yes	No N/A				
Job Title #2	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's N	ame	Phone Number			
City	State		Zip			
Duties:	1					
Reason for Leaving		Starting Salary	Ending Salary			
Job Title #3	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:	1					
Reason for Leaving		Starting Salary	Ending Salary			
Job Title #4	Start Date (mo/	day/yr)	End Date (mo/day/yr)			
Company Name	Supervisor's Na	ame	Phone Number			
City	State		Zip			
Duties:						
Reason for Leaving		Starting Salary	Ending Salary			
I certify that the information provided in this Application am employed, false statements, omissions or misrepresentations District (District) to investigate any of the information provided employer may contact any listed references on this application.	may result in m	y dismissal. I authorize Copp	per Mountain Consolidated Metropolitan			

I acknowledge and understand that the District is an "at will" employer. Therefore, any employee (regular, temporary, or other employment category) may resign at any time, just as the District may terminate the employment relationship with any employee at any time, with or without cause, with

Date

or without notice to the other party.

Applicant Signature