



Dedicated to advancing  
National Park Service  
education and scientific activities



**Application for Employment**

Crater Lake and Oregon Caves Natural History Association

**General Information**

Name(last)		(First)		Middle Initial	Phone #
Address(Mailing)		City	State	Zip	Other Phone #
E-Mail Address			Are you legally entitled to work in the US? Yes or No?		
SS#	Drivers License #	Emergency Contact Information		Name:	Phone Number:
		Relation:			

**Job Position**

Are you able to perform the essential functions of the job that you are applying for?	
Yes or No?	Full-Time or Part-Time?
Salary Desired?	Dates Available(Start and Finish Dates Please)

**Education and Training**

High School Graduate or General Education(GED) Test Passed. Yes or No?					
If no, What was the highest grade completed?					
<b>High School, College, Business School, Military</b> (Most recent First)					
Name and Location	Dates attended Month/Year	Graduate ? Yes or No?	Degree and Year?	Major or Subject	
	From				
	To				
	From				
	To				
	From				
	To				

**Veteran Information**

Branch of Service	Date of Entry	Date of Discharge
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**Special Skills** (List any special skills you might find that would be beneficial for the Association)

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**Work Experience (Most recent first) (Include voluntary work and military experience)**

Employer	Telephone Number ( ) -	From (Month/Year)
Address		
Job Title	Number of Employees Supervised if any	To (Month/Year)
Specific Duties		Hours Per Week
		Last Salary
		Supervisor

Reason for leaving \_\_\_\_\_ May we contact this employer? Yes or No?

Employer	Telephone Number ( ) -	From (Month/Year)
Address		
Job Title	Number of Employees Supervised if any	To (Month/Year)
Specific Duties		Hours Per Week
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		Supervisor

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Address		
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Specific Duties		Hours Per Week
		Last Salary
		Supervisor

Reason for leaving \_\_\_\_\_ May we contact this employer? Yes or No?

**References (Cannot be a family member)**

Name	Relation	Phone number	# of years known
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I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

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

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