

Bowling Green – Warren County Regional Airport (An Equal Opportunity Employer)

APPLICATION FOR EMPLOYMENT

Return to:

Office Manager Bowling Green – Warren County Regional Airport 1000 Woodhurst Street, Suite 210 **Bowling Green, KY 42103**

PERSONAL INFORMATION

PERSONAL INFORMATION		Date:	
Name:			
Last	First		Middle
Address:			
Street	City	State	Zip
County of legal residence:			
Home Phone Number:			
Business / Cell Phone Number	(Only if we can contact you at th	is number):	
Email Address:			
Social Security Number:			
Have you applied with us in the past?		_ If so, when? _	
Are you related to anyone at the Airport?		_ If so, whom? _	
How are you related?			
Has your name changed in the	last 5 years, and prior	name if any?	
GENERAL QUESTIONS			
1. Do you have a valid driver	s license?	State	#
2. Can you provide your own	transportation?		
3. Are you a U.S. Citizen? work legally in the U.S.? If			
4. Have you ever been convic	ted of any law violation	ns, including traffic v	iolations? (If so, please expl
5. Have you ever been dismis	sed or forced to resign	from a job?	

DESIRED EMPLOYMENT Position Applying For: Salary Desired: Full Time? _____ Part Time? _____ Desired Hours Per Week? _____ Are you employed now? _____ May we contact your employer? _____ Name/Address/Phone Number of current employer: Date you can start: Are you willing to work overtime? _____ Indicate any days or time periods you would be unable to work: **EDUCATION** High School: Name & Location Years Attended Date Graduated College: _____ Name & Location Years Attended Date Graduated Trade/Business School: Name & Location Years Attended Date Graduated **Military Service** Branch of Service: _____ Date of Entry: _____ Date of Separation: _____ What type of Discharge did you receive: _____ Indicate Reserve or National Guard Status, if any: SPECIAL SKILLS/TRAINING/EXPERIENCE/LANGUAGES SPOKEN: _____ EMPLOYMENT RECORD (Please list your last three employers, starting with most recent) Name & Address: Supervisors Name: ______ Telephone Number: _____ Date of Employment: ______ to _____ Position: _____

Full Time or Part Time: _____ Salary: Starting _____ Final ____

Supervisors Name: Date of Employment:		Telephone Nu	
Date of Employment:		-	umber:
	to		
full Time or Part Time: _		Position:	
		Salary: Starting	Final
ist Specific Duties:			
eason for leaving emplo	yment?		
		Telephone N	
		Position:	
		Salary: Starting	
REFERENCES (List three	ee persons not relat	ted to you who know your qualifi	ications or who know your cha
	lress	Phone	Years Acquainted
		Phone	Years Acquainted
Name Add			

I authorize the Airport to verify of all statements contained in this application. I specifically authorize the Airport to conduct a criminal background investigation. I understand and agree that if a position is offered, and later it is found that the information herein is significantly untrue, incomplete or misrepresented, the Airport is relieved of all commitments to me, and I am subject to immediate discharge without recourse. I understand that any employee handbook which I may receive will not constitute an employment contract, but will be a guideline only to Airport policies. I understand that compliance with the Airport's substance abuse policy is a condition of employment, and that my employment, and continued employment, is contingent on such compliance. I understand that the Airport requires employees to be free of alcohol and drug abuse. I agree to submit to screening for alcohol and drugs in accordance with Airport policy. Further, I understand that if I am hired, my employment is for an introductory period of sixty (60) days during which I may be terminated at any time without prior notice; and therefore subject to the guidelines of the Bowling Green-Warren County Regional Airport Employee Personnel Policies. I authorize prior employers to provide such information concerning my employment with them as may be requested by Airport.

Signature	Date	
	DO NOT WRITE BELOW THIS LINE	
Remarks:		