

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

Return to: Bowling Green – Warren County

Regional Airport 1000 Woodhurst Street, Suite 210 Bowling Green, KY 42103

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 this number):	
Email Address:			
Social Security Number:			
Have you applied with us in th	e 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 pri	ior 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.? E		t, are you authorized by th	
0,			

5. Have you ever been dismissed 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 Nur	nber of current employer	:	
Date you can start:		Are you willing to work overtime?	
Indicate any days or time	periods you would be una	ble to work:	

EDUCATION

Name & Location Years Attended Date C College:	Graduated			
College:				
Name & LocationYears AttendedDate C	Graduated			
Trade/Business School:				
Name & LocationYears AttendedDate C	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

List Specific Duties:				-
Reason for leaving employment?				-
Name & Address:				-
Supervisors Name:				-
Date of Employment:	to	Position:		_
Full Time or Part Time:	9	Salary: Starting	Final	_
List Specific Duties:				-
Reason for leaving employment?				-
Name & Address:				-
Supervisors Name:		Telephone	e Number:	
Date of Employment:	to	Position:		_
Full Time or Part Time:	9	Salary: Starting	Final	-
List Specific Duties:				
<u> </u>				-
Reason for leaving employment?				-

REFERENCES (List three persons not related to you who know your qualifications or who know your character.)

1				
	Name	Address	Phone	Years Acquainted
2				
	Name	Address	Phone	Years Acquainted
3				
	Name	Address	Phone	Years Acquainted

Are there any particular experiences, skills, or qualifications which you feel would especially fit you for work with the Airport in the position (s) for which you have applied?

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: _____