

ROUTT COUNTY HUMAN RESOURCES

P.O. Box 773598
136 6th Street, STE 107
Steamboat Springs, CO 80477-3598
(970) 870-5361 Fax (970) 870-5362

MEMORANDUM

TO: Applicants for all **Yampa Valley Regional Airport Positions**
FROM: The Airport Manager
RE: Application Process

Thank you for your interest in a position with the **Yampa Valley Regional Airport**. Please review and complete all the required documents.

A cover letter and the completed **Airport Application Packet** can be delivered to:

- 1) Human Resources, 136 6th Street, Steamboat Springs, CO
- 2) e-mailed to Georgian Kalow at gkalow@co.routt.co.us
- 3) faxed to 970-870-5362
- 4) Applications can be mailed to PO Box 773598, Steamboat Springs, CO 80477-3598.

All application paperwork must be received on or before the due day/time listed.

IMPORTANT: Applications must be complete and accompanied by a cover letter to be considered.

Following review and evaluation of the applications, we will notify those individuals selected for interviews.

**ALL APPLICANTS FOR CDL POSITIONS PLEASE NOTE:
Failure to successfully pass the drug screening and back ground check
will result in disqualification from employment.**

Thank you for your interest in working for Routt County and the Yampa Valley Regional Airport.

Yampa Valley Regional Airport

AUTHORIZATION TO RELEASE INFORMATION

Full Name: _____
Date of birth: _____
SS#: _____
Driver's License #: _____

Please Read Each Statement Carefully Before Signing

I certify that all information provided in this employment application is true and complete. I understand any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I understand that the employer may request a background investigation and a consumer report. The report may include information as to my character; reputation, personal characteristics and mode of living obtained from interviews with neighbors, friends, former employers, school and others. I understand I have a right to make a written request within a reasonable time for the disclosure for the name and address of the consumer reporting agency so that I may request a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application and also authorize any person, school, current employer (except as previously noted), past employers and organizations named in this application to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I understand I may be required to successfully pass a drug screening examination and consent to the s requirement at any time.

I further certify that I am aware of and understand the instructions, conditions and other information provided in this document.

Signature of Applicant

Notary: _____ Expires: _____ Date: _____

Seal

YAMPA VALLEY REGIONAL AIRPORT

Please complete the following to be submitted with the Routt County Application.

CRIMINAL HISTORY:

List all arrests and detainments by the police, including traffic violations in the last 10 years:

Have you ever been arrested for driving while intoxicated? () Yes () No

Have you ever been denied issuance of a driver's license or have you ever had your driver's license suspended or revoked? () Yes () No

Have you been involved in a traffic accident in the past three (3) years? () Yes () No

Have you ever been convicted of a felony? () Yes () No

HAVE YOU EVER BEEN CONVICTED OR FOUND NOT GUILTY BY REASON OF INSANITY, OF ANY OF THE FOLLOWING IN THE PAST TEN (10) YEARS?

YES NO

- | | | |
|-------|-------|--|
| _____ | _____ | Forgery of Certificates, false making of aircraft, and any other aircraft registration. Violation (49 U.S.C 46306) |
| _____ | _____ | Interference with air navigation. (49 U.S.C. 46308) |
| _____ | _____ | Improper transportation of hazardous material. (49 U.S.C 46312) |
| _____ | _____ | Aircraft Piracy. (49 U.S.C. 46502) |
| _____ | _____ | Interference with flight crew members or attendants. (49 U.S.C 46504) |
| _____ | _____ | Commission of certain crimes aboard aircraft in flight. (49 U.S.C 46506) |
| _____ | _____ | Carrying a weapon or explosive aboard an aircraft. (49 U.S.C. 46505) |
| _____ | _____ | Conveying false information or threats. (49 U.S.C. 46507) |
| _____ | _____ | Aircraft piracy outside the special aircraft jurisdiction of the United States. (49 U.S.C. 46502-b) |
| _____ | _____ | Violations involving transporting of controlled substances. (49 U.S.C. 46315) |
| _____ | _____ | Unlawful entry into an aircraft or airport area that serves air carriers, foreign or domestic. (49 U.S.C. 46314) |
| _____ | _____ | Destruction of an aircraft or aircraft facility. (18 U.S.C. 32) |
| _____ | _____ | Murder |
| _____ | _____ | Assault with intent to murder. |
| _____ | _____ | Espionage. |
| _____ | _____ | Sedition. |
| _____ | _____ | Kidnapping, or hostage taking. |
| _____ | _____ | Treason. |

YES **NO**

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Rape or aggravated sexual abuse. |
| <input type="checkbox"/> | <input type="checkbox"/> | Unlawful possession, use, sale, distribution, or manufacture of an explosive or weapon. |
| <input type="checkbox"/> | <input type="checkbox"/> | Extortion. |
| <input type="checkbox"/> | <input type="checkbox"/> | Armed robbery. |
| <input type="checkbox"/> | <input type="checkbox"/> | Illegal use of, distribution of (or the intent to distribute) a controlled substance. |
| <input type="checkbox"/> | <input type="checkbox"/> | Felony arson. |
| <input type="checkbox"/> | <input type="checkbox"/> | Felony unarmed robbery |
| <input type="checkbox"/> | <input type="checkbox"/> | A Felony involving a threat |
| <input type="checkbox"/> | <input type="checkbox"/> | Willful destruction of property |
| <input type="checkbox"/> | <input type="checkbox"/> | Importation or manufacture of a controlled substance |
| <input type="checkbox"/> | <input type="checkbox"/> | Burglary |
| <input type="checkbox"/> | <input type="checkbox"/> | Theft |
| <input type="checkbox"/> | <input type="checkbox"/> | Dishonesty, fraud, or misrepresentation |
| <input type="checkbox"/> | <input type="checkbox"/> | Possession or distribution of stolen property |
| <input type="checkbox"/> | <input type="checkbox"/> | Aggravated assault |
| <input type="checkbox"/> | <input type="checkbox"/> | Bribery |
| <input type="checkbox"/> | <input type="checkbox"/> | Illegal possession of a controlled substance punishable by a maximum term of imprisonment of more than 1 year, or any other crime classified as a felony that the administrator determines indicates a propensity for placing contraband aboard an aircraft in return for money. |
| <input type="checkbox"/> | <input type="checkbox"/> | Conspiracy or attempt to commit any of these acts or crimes listed here. |

ROUTT COUNTY

APPLICATION FOR EMPLOYMENT

An Equal Opportunity Employer

We do not discriminate on the basis of political affiliation, race, creed, color, national origin, ancestry, sex, sexual orientation, age, religion, handicap, disability, veteran status or genetic information. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job related information.

Job Applied for _____ Today's Date _____

Where did you hear about this job? _____

Are you seeking: Full-time Part-time Seasonal employment?

When could you start work? _____

Last Name	First Name	Middle Name	Telephone Number
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Present Address (Physical and Mailing)	City	State	Zip Code
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Are you 18 years of age or older? Yes No
(if you are hired, you may be required to submit proof of age)

If hired, can you furnish proof that you are eligible to work in the U.S.? Yes No .

Have you ever applied to Routt County before? Yes No If yes, when? _____

Were you previously employed by Routt County? Yes No If yes, when? _____

Have you ever been convicted of any law violation? Include any plea of "guilty" or "no contest."
 Exclude minor traffic violations. Yes No

If yes, give details _____
(A conviction will not necessarily disqualify an applicant for employment.)

If employed, do you expect to be engaged in any additional business or employment outside of our job?
 Yes No .

If yes give details _____

EDUCATION

List Name and Address of Schools

(You may be asked to furnish a transcript as proof that the diploma/degree was obtained)

Number of
Years
Completed

Diploma/
Degree
Certificate

High School or GED: _____

College or University: _____

Subjects Studied: _____

Vocation or Technical: _____

Subjects Studied: _____

SPECIAL SKILLS

What skills or additional training do you have that are related to the job for which you are applying? _____

What machines or equipment can you operate that relate to the job for which you are applying? _____

For Driving Jobs Only: do you have a valid driver's license?

Yes

No

Driver's License Number _____ Class of License _____ State Licensed In _____

Have you had your driver's license suspended or revoked in the last 3 years? Yes

No

If yes, give details: _____

List professional, trade, business or civic activities and offices held. (Exclude labor organizations and memberships which reveal political affiliation, race, creed, color, national origin, ancestry, sex, sexual orientation, age, religion, handicap, disability, veteran status, or other protected status.)

WORK HISTORY

List names of employers in consecutive order with present employer listed first. Account for all periods of time including military service (include DD214) and periods of unemployment. If self-employed, give firm name and supply business references. **Note: A job offer may be contingent upon acceptable references from current and former employers.**

Name of Employer _____	Supervisor(s) _____	
Address _____	Employed from (mo/yr) _____	To(mo/yr) _____
Telephone _____	Hourly Rate - Start \$ _____	Final \$ _____
Title _____	Reason for Leaving _____	
Duties: _____		

Name of Employer _____	Supervisor(s) _____	
Address _____	Employed from (mo/yr) _____	To(mo/yr) _____
Telephone _____	Hourly Rate - Start \$ _____	Final \$ _____
Title _____	Reason for Leaving _____	
Duties: _____		

Name of Employer _____	Supervisor(s) _____	
Address _____	Employed from (mo/yr) _____	To(mo/yr) _____
Telephone _____	Hourly Rate - Start \$ _____	Final \$ _____
Title _____	Reason for Leaving _____	
Duties: _____		

Name of Employer _____	Supervisor(s) _____	
Address _____	Employed from (mo/yr) _____	To(mo/yr) _____
Telephone _____	Hourly Rate - Start \$ _____	Final \$ _____
Title _____	Reason for Leaving _____	
Duties: _____		

Have you worked or attended school under any other names? Yes No .

If yes, give names: _____

Are you presently employed? Yes No .

If yes, whom do you suggest we contact at your current employment? _____

Have you ever been fired from a job or asked to resign? Yes No .

If yes, please explain: _____

REFERENCES

List three references, not relatives or former employers.

Name

Address

Phone

AFFIDAVIT, CONSENT AND RELEASE PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this employment application is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

I UNDERSTAND THAT THIS APPLICATION, VERBAL STATEMENTS BY MANAGEMENT, OR SUBSEQUENT EMPLOYMENT DOES NOT CREATE AN EXPRESS OR IMPLIED CONTRACT OF EMPLOYMENT NOR GUARANTEE EMPLOYMENT FOR ANY DEFINITE PERIOD OF TIME. ONLY THE COUNTY COMMISSIONERS OF ROUTT COUNTY HAVE THE AUTHORITY TO ENTER INTO AN AGREEMENT OF EMPLOYMENT FOR ANY SPECIFIED PERIOD AND SUCH AGREEMENT MUST BE IN WRITING, SIGNED BY THE COUNTY COMMISSIONERS AND THE EMPLOYEE. IF EMPLOYED, I UNDERSTAND THAT I HAVE BEEN HIRED AT THE WILL OF THE EMPLOYER AND MY EMPLOYMENT MAY BE TERMINATED AT ANY TIME, WITH OR WITHOUT REASON AND WITH OR WITHOUT NOTICE.

I have read, understand, and by my signature consent to these statements.

Signature: _____ Date: _____

APPLICANT AFFIRMATIVE ACTION INFORMATION

It is the policy of this organization to provide equal employment opportunity to all qualified applicants for employment without regard to of political affiliation, race, creed, color, national origin, ancestry, sex, sexual orientation, age, religion, handicap, disability, veteran status or genetic information. As an affirmative action employer under E.O. 11246 we invite all applicants to identify themselves as indicated below.

COMPLETION OF THIS FORM IS VOLUNTARY AND IN NO WAY AFFECTS THE DECISION REGARDING YOUR APPLICATION FOR EMPLOYMENT. THIS FORM IS CONFIDENTIAL AND WILL BE MAINTAINED SEPARATELY FROM YOUR APPLICATION FORM.

PLEASE PRINT

Name _____ Date _____
Last First Middle

Position applied for (list only one) _____

Racial origin (You may mark one or more of the following):

- White** – A person having origins in any of the original peoples of Europe, the Middle East or North Africa.
- American Indian or Alaska Native** – A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Black or African American** – A person having origins in any of the black racial groups of Africa.
- Asian** – A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- Native Hawaiian or Other Pacific Islander** – A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

Ethnicity:

- Hispanic or Latino** – A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- I elect not to identify.

Sex: Male Female

I elect not to identify.

Signature _____