

**Spring Creek Association**  
451 Spring Creek Parkway, Spring Creek, NV 89815  
Telephone (775) 753-6295  
Fax (775) 753-9539

**EMPLOYMENT APPLICATION**  
An Equal Opportunity Employer

**If you have a disability and believe you require accommodation for the disability during the selection process, please contact us to make appropriate arrangements.**

**INSTRUCTIONS: THIS APPLICATION IS PART OF THE EXAMINATION PROCESS. TYPE OR PRINT CLEARLY. ANSWER ALL QUESTIONS COMPLETELY AND CORRECTLY.**

**Position Applied For:** \_\_\_\_\_  
**Department:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Name:** \_\_\_\_\_ **SSN#:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_  
**State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_ **Telephone:** ( ) \_\_\_\_\_  
Are you a current Spring Creek Association employee? Yes \_\_\_ No \_\_\_ If Yes, what department \_\_\_\_\_

**EDUCATION RECORD**

Did you graduate from high school or receive a GED certificate? Yes \_\_\_\_\_ No \_\_\_\_\_

School Name	Location	Hours Earned	Diploma, Degree or Certificate	Major Field of Study
High School				
Business/Technical/Vocational				
College/University(Undergraduate)				
1.				
2.				
Graduate School				

For positions which require high school graduation or GED, or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.

**LICENSES** (Optional, unless required for the position for which you are now applying.)

List Driver's License and other current licenses, certifications, or registrations required for the position for which you are applying. Indicate types, state license numbers and expiration dates.

List any special skills you possess and/or equipment or office machines you can operate.

LANGUAGE (other than English) in which you can clearly communicate.

\_\_\_\_\_ Speak \_\_\_\_\_ Read \_\_\_\_\_ Write \_\_\_\_\_



## OTHER INFORMATION

If you are not a current Spring Creek Association employee, have you previously worked for the Spring Creek Association?

Yes \_\_\_ No \_\_\_ When? \_\_\_\_\_

Is a relative of yours currently employed by the Spring Creek Association? Yes \_\_\_ No \_\_\_

If yes, what is their name? \_\_\_\_\_

During the last ten years, have you been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony or any lesser crime which may be directly related to your qualifications for this job?

(Example: Conviction for reckless driving may not be related to your qualifications for a clerical position in the administrative department, but could be related to your qualifications for a road maintenance worker.) Yes \_\_\_ No \_\_\_

If yes, list all such offenses and state date, name of court and disposition. You may omit minor violations for which you paid a fine of \$50 or less.

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## ACKNOWLEDGMENTS

Please **READ ALL** of the following statements and **INITIAL EACH** of the boxes to indicate you have read and understand each of the statements. If you have questions, contact Spring Creek Association Corporate Office.

- ☐ Following an offer of employment, you will be required to submit verification of your legal right to work in the United States.
- ☐ All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.
- ☐ Employment will be *at will* unless specifically stated to be otherwise. "*At will*" means the Spring Creek Association has no obligation to continue your employment in the future.
- ☐ This application is the property of the Spring Creek Association and will become part of my personnel file if I am hired.

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## EMPLOYMENT HISTORY

Instructions: Be specific and complete. The information provided will be used to determine if you meet the minimum qualifications and, if an examination is required, whether you will be admitted. Provide information regarding all paid, military, and volunteer work which may be related to the position for which you are applying. Describe your most recent position first; then list other relevant positions in order, working down from the most recent. Use a separate block for each position – even though with the same organization. Use additional sheets if necessary. Do **NOT** use references such as "See Resume" in place of completing this section.

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May we contact all employers listed? Yes \_\_\_ No \_\_\_ (Attach a list of any exceptions with an explanation.)

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Present Employer: \_\_\_\_\_ Present Position: \_\_\_\_\_  
Address: \_\_\_\_\_ From (Mo./Yr.) \_\_\_\_\_ To (Mo./Yr.) \_\_\_\_\_  
City, State Zip: \_\_\_\_\_ Full-Time (30+ hrs./wk.) \_\_\_ Part-Time (<30 hrs./wk.) \_\_\_  
Telephone: \_\_\_\_\_ Supervisor's Name/Title: \_\_\_\_\_ Salary: \$ \_\_\_\_\_  
Related Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_



Previous Employer: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ From (Mo./Yr.) \_\_\_\_\_ To (Mo./Yr.) \_\_\_\_\_  
City, State Zip: \_\_\_\_\_ Full-Time (30+ hr./wk.) \_\_\_\_\_ Part-Time (<30 hr./wk.) \_\_\_\_\_  
Supervisor's Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_ Salary: \$ \_\_\_\_\_  
Related Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Previous Employer: \_\_\_\_\_ Position: \_\_\_\_\_  
Address: \_\_\_\_\_ From (Mo./Yr.) \_\_\_\_\_ To (Mo./Yr.) \_\_\_\_\_  
City, State Zip: \_\_\_\_\_ Full-Time (30+ hr./wk.) \_\_\_\_\_ Part-Time (<30 hr./wk.) \_\_\_\_\_  
Supervisor's Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_ Salary: \$ \_\_\_\_\_  
Related Duties: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

I understand that an investigation may be made in which information is gathered regarding my character, previous employment, education background, criminal history and other qualifications for employment with the Spring Creek Association. I authorize anyone possessing this information to furnish it to the Spring Creek Association upon request, and I release the Spring Creek Association and all persons, firms or organizations furnishing such information from all liability and damages whatsoever in furnishing, obtaining or using said information.

I certify that all statements are true to the best of my knowledge, and I agree and understand that any misstatements or omissions of material facts on my part may forfeit my participation in the selection process and/or my right to employment, even if discovered after I have become an employee of the Spring Creek Association.

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