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**High Desert Food & Farm Alliance Employment Application**

Instructions: Please fill in each section and skip questions that are not applicable. Use an electronic signature or sign and scan this document. **Save the form with the title “LastName\_First\_Employment Application”** and include it with your application materials.

Full Name

Current Mailing Address

State and Zip Code

Telephone Number

Email Address

Job Title(s) for which you are applying:

When will you be available to begin work?:
If the position requires travel, are you willing to travel (Check One) \_\_NO \_\_SOME \_\_OFTEN

Driver’s License Number

State providing the license

How did you learn of this position?

**Prior Employment and Volunteer Work**

Please list all employment in the last ten years; use additional space if necessary.

 Check box to skip this section **ONLY if all information is included on your resume**

(1) Name of Business/Organization Website URL

Name of Supervisor

Telephone Number Email Address

Your Position and duties

Average hours per week

Dates of Employment

Reason for Leaving

(2) Name of Business/Organization Website URL

Name of Supervisor

Telephone Number Email Address

Your Position and duties

Average hours per week
Dates of Employment

Reason for Leaving

(3) Name of Business/Organization Website URL

Name of Supervisor

Telephone Number Email Address

Average hours per week

Your Position and duties

Dates of Employment

Reason for Leaving

**Education**

List the last two levels of education completed.

Check box to skip this section **ONLY if all information is included on your resume**

(1)School Year graduated

Degree earned Major or topic of study

(2)School Year graduated

Degree earned Major or topic of study

**References (2 Professional, 1 Personal)**

(1) Full Name

Mailing Address State Zip

Telephone Email Address

When did you meet this person?

What is your relationship with this individual?

(2) Full Name

Mailing Address State Zip

Telephone Email Address

When did you meet this person?

What is your relationship with this individual?

(3) Full Name

Mailing Address State Zip

Telephone Email Address

When did you meet this person?

What is your relationship with this individual?

May inquiry be made of your current employer regarding your character, qualifications, and record of employment? \_\_\_YES \_\_\_NO \_\_\_With advance notice to the applicant. Note that a “no” will not affect your consideration for employment opportunities.

**COMPUTER and other office machine experience, training.** Please name the software with which you have experience in the following areas:

|  |  |  |
| --- | --- | --- |
| **TASK** | **NAME OF SOFTWARE** | **LEVEL OF EXPERTISE (0-5)****5 BEING HIGH LEVEL** |
| Word processing |  |  |
| Spreadsheets |  |  |
| Emailing |  |  |
| Data Management / Analysis |  |  |
| Presentations |  |  |
| Photo editing |  |  |
| Creation of flyers, brochures, etc. |  |  |
| Other |  |  |

I certify that everything I have disclosed in this employment application is accurate. I authorize the High Desert Food & Farm alliance to contact every individual I have named in this application to confirm my statements and conduct a background check on me. I authorize HDFFA to contact the Department of Motor Vehicles from my state to request a copy of my driving history.

Signature (can be electronic)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_