



P.O. Box 1390, Fallon, NV 89407-1390  
(775) 423-7171

### 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.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Position Applied For: \_\_\_\_\_

#### 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
Business/Technical/Vocational				
College/University (Undergraduate)				
Graduate School				

For positions that require a high school graduation or GED or 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 – see the job description for details)

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 as they relate to the position applying for. Please do NOT write "See Resume".

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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OTHER INFORMATION

Have you ever been employed by CC Communications? Yes  No  When? \_\_\_\_\_

Is a relative of yours currently employed by CC Communications? Yes  No  Name: \_\_\_\_\_

Have you ever been convicted of, pled guilty or nolo contendere to, or been granted deferred adjudication for a felony or any lesser crime, other than a minor traffic infraction? Yes  No  A conviction or guilty plea will not necessarily disqualify you for this job. **If yes**, list all such offenses and provide date, name of court, and disposition. An omission of information that shows up on a criminal background check will be grounds for termination. You may omit minor violations for which you only paid a fine of \$150 or less. **Omission of information may be considered cause of disqualification or dismissal.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been disciplined in your employment related to workplace violence? Yes  No  If yes, please explain:

\_\_\_\_\_

Do you presently use illegal drugs? Yes  No

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EMPLOYMENT HISTORY

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. List only employment, military service, volunteer work, or training which meets the requirements for this position. Use additional sheets if necessary. Do **NOT** use notations such as "See Resume" in place of completing this section. Please fill in actual duties performed.

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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.) \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_ Salary: \_\_\_\_\_

Related Duties:

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

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Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Address: \_\_\_\_\_ From (Mo./Yr.) \_\_\_\_\_ To (Mo./Yr.) \_\_\_\_\_

City, State, Zip: \_\_\_\_\_ Full-Time (30 + hrs./wk.) \_\_\_\_\_ Part-Time (< 30 hrs./wk.) \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_ Telephone: \_\_\_\_\_ Salary: \_\_\_\_\_

Related Duties:

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

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**EMPLOYMENT HISTORY (continued)**

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

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

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

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

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

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

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

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



## Marketing Information

Please indicate how you heard about this position. Please do not list any individual names. All information given is used to gauge marketing methods (i.e. internet, radio, local newspaper, friend, etc.) \_\_\_\_\_

## Authorization

I authorize CC Communications to contact any organization or individual that I have listed on my employment application and/or resume or mentioned in job interviews, and to obtain from them any relevant information regarding my previous employment, education, certificates, licenses, military service, criminal history, characteristics or traits, or other qualifications for employment with CC Communications.

In exchange for CC Communications' consideration of my employment application, I authorize anyone possessing this information to furnish it to CC Communications upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including CC Communications, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

Additionally, my signature below certifies that the information provided is true and correct to the best of my knowledge. If I am hired by CC Communications, I agree to follow all policies and procedures of CC Communications and submit to a criminal background check.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Signature must be an original signature (i.e. not faxed, copied, emailed, etc.)