



West Virginia Department of Agriculture
An Equal Opportunity Employer
Application for Employment

- INSTRUCTIONS:**
- ◆ Complete Entire Application
 - ◆ "See Resume" Not Acceptable
 - ◆ Please Attach Resume

Employees of the West Virginia Department of Agriculture and applicants for employment shall be afforded equal opportunity in all aspects of employment without regard to race, color, religion, sex, age, national origin or ancestry, disability (including blindness), medical condition, marital status, veteran status, political affiliation or any other protected status defined by law.

Full Legal Name: _____
Last First Middle

Social Security Number: _____

Current Address: _____ How long? _____
City State Zip

Previous Address: _____ How long? _____
City State Zip

Home Phone: _____ Business Phone: _____

Other Phone: _____ Email Address: _____

Note: Social security number is optional on this application. However, social security number will be required on other forms prior to employment.

Position applied for: _____ Closing Date: _____

How did you hear about this opportunity? Newspaper Website Word-of-Mouth Other (specify) _____

Have you worked here previously? No Yes If yes, when? _____ what position? _____

Have you applied here previously? No Yes If yes, when? _____ what position? _____

Type of employment you will accept: Full-Time Part-Time Temporary Seasonal (specify) _____

Are you willing to accept employment that requires travel? No Day Travel Only Occasional Overnight Frequent Overnight

Are you legally eligible for employment in the United States? No Yes If temporarily, enter expiration date: _____

Have you been convicted of a felony in the past seven years? No Yes If yes, what was the conviction? _____

A "Yes" answer will not automatically bar you from employment unless the conviction relates to the position for which you are applying.

If applicable, list names and relationships of relatives working for the West Virginia Department of Agriculture:

Education

Did you receive a high school diploma or a general equivalency diploma (GED)? Yes No

Check highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 College

Check number of post high school years of education completed: 1 2 3 4 5 6 7 8+

Type	Name	Location	Major / Specialty
High School			
College (Undergraduate)			
College (Graduate)			
Business or Vo-Tech			

Technical Skills (list computer programs and proficiency level) If applicable, Typing _____ wpm Shorthand _____ wpm

Employment History

Starting with the most recent, describe all paid, military and applicable voluntary experience. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position. List significantly different jobs within the same organization as separate items. *Use Supplemental Employment History Forms as needed.* **Important Reminder:** "See Resume" is not an acceptable response.

Employer: _____ Dates Employed: _____
 Address: _____ Phone: _____
 Job Title: _____ Supervisor: _____ Salary: _____
 Duties Performed: _____
 Reason for Leaving: _____

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References (list professional and character references other than relatives)

Name: _____ Title/Relationship: _____
 Address: _____ Telephone: _____

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 Address: _____ Telephone: _____

May we contact your current employer? No Yes Contact Name: _____ Phone: _____

Statement of Applicant

I hereby affirm under penalty of law and disqualification that this application contains no willful misrepresentation or falsification, and that the information given is true and complete to the best of my knowledge or belief. I am aware that if any investigation at any time discloses any such misrepresentation or falsification I will be subject to dismissal.

I authorize the West Virginia Department of Agriculture and any agent acting on its behalf to conduct an inquiry into any job-related information contained in this application. I release the West Virginia Department of Agriculture and any agent acting on its behalf from any and all liability by reason of the request for such information. I further authorize and request each former employer, educational institution, or organization (including law enforcement agencies) to provide all information that may be sought in connection with this application.

Signature: _____ Date: _____

Return application to: **West Virginia Department of Agriculture, 1900 Kanawha Blvd., E., Charleston, WV 25305-0170**

Supplemental Employment History Form

Starting with the most recent, describe all paid, military and applicable voluntary experience. Highlight your knowledge, skills and abilities which best demonstrate your qualifications for this position. List significantly different jobs within the same organization as separate items. *Use Supplemental Employment History Forms as needed.* **Important Reminder:** "See Resume" is not an acceptable response.

Employer: _____ Dates Employed: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____ Salary: _____
Duties Performed: _____
Reason for Leaving: _____

Employer: _____ Dates Employed: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____ Salary: _____
Duties Performed: _____
Reason for Leaving: _____

Employer: _____ Dates Employed: _____
Address: _____ Phone: _____
Job Title: _____ Supervisor: _____ Salary: _____
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