KANSAS DEPARTMENT OF WILDLIFE & PARKS

Operations Office Personnel Office 512 SE 25th Ave., Pratt, KS 67124-8174 (620) 672-5911 Office Of The Secretary 1020 S Kansas Ave., Suite 200, Topeka, KS 66612-1327 (785) 296-2281

Application for Employment

Position or type of work you are applying for:	Date available for work: Date of application:
Check type of employment you are applying for:	time Part-time Temporary Summer
Preferred location:	

PERSONAL DATA

Print last name, first name, middle name	Telephone number (include area code)			
Address (street and number)	City, State, Zip Code	County		
Are you related to any present Department of Wildlife and Parks employee? Yes No If yes, name of employee and your relationship to that employee:				
(<i>K.S.A. 1-9-21 prohibits the supervision of household and/or family members</i>) Have you previously retired from the State of Kansas or any other KPERS employer? Yes No				
Have you ever been convicted of a felony? Yes No If convicted, explain below:				

If you are considered for any position associated with enforcing hunting, fishing, boating, park use, and fur harvesting laws, we reserve the right to conduct a law enforcement background check.

EDUCATIONAL DATA

Circle highest grade completed: Primary education: 7 0 8 0 9 0 10 0 11 0 12 00	Secondary education (College): nary education: 7 0 8 0 9 0 10 0 11 0 12 0 0 0 0		
Name and address of colleges:	Major subjects:	Dates attended From To	l List Degree
Name and address of other schools:	Major subjects:	From To	Degree
Name and address of other schools:	Major subjects:	From To	Degree
Other skills and abilities (explain):			

EMPLOYMENT HISTORY

List your last three employers, listing your present or last employer first.			
Name of employer:	Address:	Type of business:	
Date employed Hrs. per week	Starting salary:	Name of supervisor:	
From To	Last salary:		
Your job title and duties: If longer than the box use (See Resume)		
Reason for leaving:			
May we contact employer: Yes No			
Name of employer:	Address:	Type of business:	
Date employed Hrs. per week	Starting salary:	Name of supervisor:	
From To	Last salary:		
Your job title and duties: If longer than the box use (See Resume)		
Reason for leaving:			
May we contact employer: Yes No			
Name of employer:	Address:	Type of business:	
Date employed Hrs. per week	Starting salary:	Name of supervisor:	
From To	Last salary:		
Your job title and duties: If longer than the box use (See Resume)			
Reason for leaving:			
May we contact employer: Yes Mo			
I certify that the statements in this application are correct	t, and if employed, understand that any false inform	nation or omissions of material	

I certify that the statements in this application are correct, and if employed, understand that any false information or omissions of material facts in this application may result in termination without notice. I reserve the right to initiate civil or criminal action against those who provide false or libelous information.

APPLICANT SIGNATURE

DATE

OPTIONAL EMPLOYEE INFORMATION

Completing the "Optional Employee Information" section is optional, unless you are hired. If hired, this section must be completed before you can be appointed. If you wish to fill in this section before you are hired, you may do so, but the information in this section cannot be used in any interview or hiring decision. Regarding birth date, the Age Discrimination in the Employment Act of 1979 prohibits discrimination on basis of age.

Birth date (Month, Day, Year):	Social Security Number:	Sex:
In case of emergency, notify: Name:	Address:	Telephone: