

Sublette County Weed & Pest

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 Ph. 307-367-4728 Fax 307-367-3313
 Email: scwpoffice@gmail.com
 Website: www.sublettecountyweed.com



Seasonal Spray Crew

APPLICANT INFORMATION

Last Name		First		M.I.	
Mailing Address		Physical Address			
City		State		ZIP	
Cell Phone		E-mail Address			
Are you 18 Years or Older?	YES ___	NO ___	Date of Birth:		
Driving is an essential duty for this position. Job offers will be contingent on a clean motor vehicle record. Do you have a valid driver's license? YES___ NO___					
Date Available		Will you work overtime if asked?		YES ___ NO ___	
Have you ever been convicted of a felony?	YES___	NO___	If yes, explain		
Are you authorized to work in the U.S.?	YES___	NO___			

EDUCATION

High School		Address			
Years Completed	Did you graduate?	YES___	NO___	Degree	
College		Address			
Years Completed	Did you graduate?	YES___	NO___	Degree	
Other		Address			
Years Completed	Did you graduate?	YES___	NO___	Degree	

*SUBLETTE COUNTY IS AN EQUAL OPPORTUNITY EMPLOYER

EMERGENCY CONTACT

Full Name		Relationship	
Phone			
Full Name		Relationship	
Phone			

PREVIOUS EMPLOYMENT

Company			Phone
Address			Supervisor
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES__ NO__			
Company			Phone
Address			Supervisor
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES__ NO__			
Company			Phone
Address			Supervisor
Responsibilities			
From	To	Reason for Leaving	
May we contact your previous supervisor for a reference? YES__ NO__			

MILITARY SERVICE

Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		

Summer spray crew positions are physically demanding. Are you able to lift and carry a 30-35lb. backpack for several hours during the day over rough and/or uneven terrain? YES__ NO__

Describe any training or related activities that are relevant to the position you are applying for:
(Including activities and positions held in civic, community and school organizations, professional societies, special training and skills.)

In a short paragraph please describe why you would like to work at the Weed & Pest and why you may be more qualified for this position than another applicant.

DISCLAIMER AND SIGNATURE

**I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.**

Signature

Date