

SOUTHEAST IOWA REGIONAL AIRPORT AUTHORITY	Date	(Internal Use Only)
	Position Applied For	
2515 Summer Street → Burlington, IA 52601-3330 → (319) 754-1414 → fax: (319) 754-1424		
Name: Last	First	Middle
Social Security No.		Home Phone No.
Address: No. & Street	City	State Zip
Emergency: Name		Phone No.

EDUCATION Cite Specialized Training Other Than Formal Education On Reverse Side

High School Dates Attended: Mo/Day/Yr - Mo/Day/Yr	Name of School	Graduated: Yes No	GED: Yes No
	Address: No. & Street City State Zip Code		Vocational Program
College Dates Attended: Mo/Day/Yr - Mo/Day/Yr	Name of College	Graduated: Yes No	Degree
	Address: No. & Street City State Zip Code		Major
Other Schools Dates Attended: Mo/Day/Yr - Mo/Day/Yr	Name of Institution	Graduated: Yes No	Degree or Certification
	Address: No. & Street City State Zip Code		Major/Type of Program

EMPLOYMENT HISTORY List All Positions Held in Reverse Order, Present (or most recent) Job First

Present Job Dates Employed: Mo/Day/Yr - Mo/Day/Yr	Name of Employer	Type of Business
	Street City State Zip Code	Company Phone No.
Your Position	Nature of Duties	
Final Salary	Supervisor: Name Title	Reason for Leaving
Previous Job Dates Employed: Mo/Day/Yr - Mo/Day/Yr	Name of Employer	Type of Business
	Street City State Zip Code	Company Phone No.
Your Position	Nature of Duties	
Final Salary	Supervisor: Name Title	Reason for Leaving
Previous Job Dates Employed: Mo/Day/Yr - Mo/Day/Yr	Name of Employer	Type of Business
	Street City State Zip Code	Company Phone No.

Your Position	Nature of Duties		
Final Salary	Supervisor: Name	Title	Reason for Leaving
Previous Job Dates Employed: Mo/Day/Yr - Mo/Day/Yr	Name of Employer		Type of Business
	Street	City State Zip Code	Company Phone No.
Your Position	Nature of Duties		
Final Salary	Supervisor: Name	Title	Reason for Leaving
Previous Job Dates Employed: Mo/Day/Yr - Mo/Day/Yr	Name of Employer		Type of Business
	Street	City State Zip Code	Company Phone No.
Your Position	Nature of Duties		
Final Salary	Supervisor: Name	Title	Reason for Leaving

Other Information

Military Dates of Service: Mo/Day/Yr - Mo/Day/Yr	Branch	Rank	Duties
	Discharge: Honorable Other (Explain)		
Qualifications and Skills	Describe Any Equipment Extensively Operated By You (Office, Construction, Buses, Trucks, Etc.)		
	Current License: Driver Commercial Driver License Chauffeur None No: State:	License ever Suspended or Revoked? Yes No Date: Reason	
Ever Convicted Of A Crime (except minor traffic violations)? Yes No Date: Offenses:		Ever Collected Money Or Bonded? Yes No For Whom:	
Have you reviewed the job description or posting for the position sought? Yes No (If yes, answer the following:) Can you perform the "essential functions" of the position with or without reasonable accommodation? Yes No			
List Any Specialized Training, Certificates Or Achievements & Dates Received.			
References List <u>Three</u> (Local Area Residents if Available)	Name	Position	Known How Long? Phone No.

**The Southeast Iowa Regional Airport Authority does not discriminate on the basis
of race, color, national origin, sex, religion, age, or
disability in employment or the provision of services**

I hereby certify that the answers given and statements made by me on this Employment Application are true and correct & that there are no material omissions. I authorize my present and former employers to give Airport Authority officials any information regarding me or my performance and release such employers, including their representatives and their companies, from all liability from damage for providing requested information. I understand that should investigation disclose misrepresentation or falsification, I will be dismissed immediately, my application will be rejected and I will be disqualified from making future application with the Airport Authority.

I understand that any employment offered by the Airport Authority is "employment at will" and I may be terminated for any reason not violative of law (or a collective bargaining agreement where applicable). I understand my driving and any criminal records may be checked and I agree to submit to a pre-employment physical examination at Airport Authority expense following a conditional offer of employment. I also understand that the Airport Authority has a strict policy against illegal drug involvement by employees that can result in immediate disqualification or dismissal from employment for any such illicit activities occurring on or off the job.

Read The Foregoing Carefully!

Date

Signature of Applicant