## BUTTE CONSERVATION DISTRICT JOB APPLICATION

NAME	LAST		FIRST		_MI
ADDRESS					
	CITY		STATE_		_ZIP
SOCIAL SECURITY NUMBER			DOB		
PHONE NUMBER/A	AREA CODE	_CELL: (	)		
WHERE?	NE CONSERVATION W				
	LEVEL COMPLETED: 5 7 8 9 10 11 12 CC	DLLEGE 12	2 3 4		
DEGREE	MA	JOR			
SPECIAL SKILLS:					
WHAT IS YOUR AREA (CIRCLE ALL THAT A	A OF AVAILABILITY? PPLY)	CITY	COUNTY	STATE	
DATE OF AVAILABIL	ITY				
HOW MUCH TIME CAN YOU GIVE: WEEKLY MONTHLY				THLY	
LIST 3 REFERENCES	THAT CAN BE CONTA	CTED:			
		P	IONE:		
		P	IONE:		
		PH	IONE:		

**PRIVACY ACT STATEMENT:** THIS INFORMATION IS PROVIDED TO COMPLY WITH THE PRIVACY ACT (PL 93:679). USC 301 AND 7 CFR 260 AUTHORIZE ACCEPTANCE OF THE INFORMATION REQUESTED ON THIS FORM. THE DATA WILL BE USED TO CONTACT APPLICANTS AND TO INTERVIEW, SCREEN, AND SELECT THEM FOR WORK ASSIGNMENTS. FURNISHING THIS DATA IS VOLUNTARY.