

MPO Use Only:	
Appl Rcvd:	

## APPLICATION FOR EMPLOYMENT

419 Canyon Avenue, Suite 300 Fort Collins, CO 80521

Phone: 970.800.9560 Fax: 970.797.9132

Position Applying For:			
Instructions: All questions should be fully and accurately answered. Please print or type, except for the requir signature. Send application and resume by email only to: bbills@nfrmpo.org			
Name: Last First M.I.			
Mailing Address:  Street City State Zip			
Telephone:			
Home Business # to Leave a Message			
Email Address: Date Available For Work:			
Are you available for: $\square$ Full Time $\square$ Part Time $\square$ Hourly Employment			
If hired, will you be able to prove your employment eligibility to work in the U.S.? $\square$ Yes $\square$ No			
Are you age 18 or older?			
Do you possess a valid driver's license?			
License Number: State: Expiration Date:			
Are you able to perform the essential functions of the job for which you are applying, with or without reasonable accommodation?   Yes   No			
Essential functions of positions are described in job advertisements/announcements specific to the position vacancy. If you are unable to perform the essential functions of the position for which you are applying, or need a reasonable accommodation in order to apply, please contact the MPO Office Administrator at 970-289-8280 for assistance.			
Have you ever been convicted of or received a deferred sentence, deferred judgment, or a deferred prosecution for a crime (other than a minor traffic offense that resulted only in a fine)? $\square$ Yes $\square$ No			
If yes, please state crime(s) and explain the date, location, nature and facts surrounding each. Use an attachment sheet if necessary.			
Have you ever been involved with a situation involving harassment in the workplace? Yes No Have you ever been involved with a situation involving violence in the workplace? Yes No If yes, to either the above, please explain the date, location, nature and facts surrounding each situation. Use an attachment sheet if necessary.			

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## North Front Range MPO Application for Employment

provide complete and accurate information on pre employers in consecutive order with present or mo	luating your qualifications. Please make certain that you vious job duties and levels of responsibility. List names of ost recent employer listed FIRST. Account for all periods of operience, as well as any period of unemployment. A pleting the Employment and Education sections.
Name of Employer:	
Type of Business:	Telephone No:
Employer's Address:Street	City State Zip
Name of Last Supervisor:	May we contact this employer:  Yes No
Employed From: To: Sa	lary: Starting: Ending:
Job Title:	Duties:
Reason(s) for leaving or seeking other employmen	nt:
Name of Employer:	
Type of Business:	
Employer's Address:	
Name of Last Supervisor:	City State Zip  May we contact this employer: Yes No
Employed From: To: Sa	lary: Starting: Ending:
Job Title:	Duties:

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## **North Front Range MPO Application for Employment**

Name of Employer:				
Type of Business:				
Employer's Address:				
Name of Last Supervisor:	City State Zip			
Employed From: To: Sal	ary: Starting: Ending:			
Job Title:	Duties:			
Reason(s) for leaving or seeking other employment				
Name of Employer:				
Type of Business:				
Employer's Address:Street				
Name of Last Supervisor:	City State Zip May we contact this employer: Yes No			
Employed From: To: Sal	ary: Starting: Ending:			
Job Title:	_ Duties:			
Reason(s) for leaving or seeking other employment:				
Name of Employer:				
Type of Business:	Telephone No:			
Employer's Address:Street	City State Zip			
Name of Last Supervisor:				
Employed From: To: Sal	ary: Starting: Ending:			
Job Title:	_ Duties:			
Reason(s) for leaving or seeking other employment				

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## North Front Range MPO Application for Employment **EDUCATION** High School: Did you graduate? ☐ Yes ☐ No College or University: Did you graduate? ☐ Yes □ No College Major: Degree: College or University: \_\_\_\_\_ Did you graduate? ☐ Yes ☐ No College Major: Additional education and/or vocational, technical or military training information relevant to the position for which you are applying: OTHER SKILLS List all pertinent skills and equipment that you can operate: Computer Software Applications: Additional information that might qualify you for the position: The North Front Range Metropolitan Planning Organization (NFRMPO) is an Equal Opportunity Employer, Applicants are considered for positions for which they have applied without regard to race, religion, sex, age, national origin, disability and other characteristics protected by law. **CERTIFICATION & RELEASE:** I certify that all statements made in this application are true and complete. I authorize the NFRMPO to investigate all statements made as a part of this application and to secure any necessary information from all prior employers, references, academic institutions, law enforcement agencies, other persons and entities, and public records. I hereby release all such persons, entities, employers, references, institutions, agencies and the NFRMPO from any and all liability arising from their giving or receiving information about my employment history, academic credentials, qualifications, reputation, driving record, and criminal record. A photocopy of this release can be used for all purposes. I understand that any false answers or misleading statements as well as misrepresentations by omission made by me as part of my application, will be sufficient for rejection of my application or for my immediate discharge should one be discovered after I am employed. I understand that nothing in this employment application, in the NFRMPO's statements of personnel policies or in my communications with any NFRMPO employee or official is intended to create an employment contract between the MPO and me. In the event that I am hired by the NFRMPO. I understand that my continued employment will be at the mutual consent of the NFRMPO and me. Accordingly, either the NFRMPO or I may terminate my employment atwill at any time with or without cause or notice. I understand that the at-will nature of the employment relationship can only be changed in a specific writing signed by the Executive Director. I hereby acknowledge that I have read, understand and agree to the preceding statement. Signature:

Date: \_\_\_\_\_

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