

APPLICATION FOR ENROLLMENT

Application form must be fully completed. Print legibly or fill in on-line. To move to next field on-line, use the tab button. Follow Application Steps on back page.

Name _____ Email _____

Address _____ City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

Participants in NOWCC sponsored programs must meet statutory minimal age requirements. If offered a position, can you provide proof that you are at least 55 years old? Yes No

Can you, after an offer is extended, submit proof of your legal right to work in the United States? Yes No

Have you ever been convicted of a felony? Yes No

If yes, when and general nature of conviction? _____
(A criminal conviction will not necessarily disqualify you.)

EDUCATIONAL RECORD

Schools Attended	Name and Location	No. Years Completed	Degree/Major
Last H.S. / GED			
College or Univ.			
Graduate School			
Other			

SKILLS/CERTIFICATIONS

List the types of office equipment with which you are proficient, such as personal computers, word processing systems, computer software (i.e. Excel, Lotus), data base systems. Include any relative technical and professional certifications.

Languages Spoken/Written: _____

List related skills/experience not shown elsewhere such as environmental, conservation, scientific, customer service or other.

VOLUNTEER / RELATIVE EXPERIENCE

Please share volunteer experience or related programs including dates of service.

Have you ever been enrolled in a SEE or ACES Program? Yes No

If yes, give final date worked and Grantee Agency name _____

EMPLOYMENT RECORD

Other name under which employment may be verified _____

Employer			Title/Role/Duties:
Address			
Supervisor	Telephone	Salary	
Employment Dates (MM/YYYY)	Reasons for Departure	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
From To			
Employer			Title and summary of duties
Address			
Supervisor	Telephone	Salary	
Employment Dates (MM/YYYY)	Reasons for Departure	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
From To			
Employer			Title and summary of duties
Address			
Supervisor	Telephone	Salary	
Employment Dates (MM/YYYY)	Reasons for Departure	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
From To			

I understand that any omission or misrepresentation of material fact in this application may result in refusal of or separation from the NOWCC Program. I certify that, if selected, continued SEE Enrollment is contingent on the successful completion of Personal Identity Verification (PIV), Finger Printing, and a National Agency Check with Inquiries (NACI). I have no objection to making application for security clearance, if necessary, signing the enrollment agreement, confidential information, or conflict of interest forms, or taking a medical examination if required.

I further authorize the companies listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you.

In consideration of my participation, I agree to conform to the policies, rules and regulations of the NOWCC Program and understand that my participation and compensation can be terminated, with or without cause, and with and without notice, at any time, at the option of either NOWCC or myself. I further understand that this "at will" enrollment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by the Chief Executive Officer of NOWCC.

Signature of Applicant

Date of Signature

Print Name

RECRUITMENT SURVEY

How did you hear about NOWCC and our programs?

- | | |
|--|---|
| <input type="checkbox"/> NEWSPAPER _____ | <input type="checkbox"/> PERSONAL REFFERRAL _____ |
| <input type="checkbox"/> TELEVISION _____ | <input type="checkbox"/> JOB SERVICE _____ |
| <input type="checkbox"/> INTERNET SITE _____ | <input type="checkbox"/> JOB FAIR/EVENT _____ |
| <input type="checkbox"/> MAGAZINE _____ | <input type="checkbox"/> OTHER _____ |

CURRENT POSITION SELECTION:

Applicant Name: _____

Please designate the code(s) from the current positions featured on our website (www.nowcc.org) for which you wish to apply:

Position Reference Code	City/State	Position Title
<i>ie. BN-989</i>	<i>Falseville, New Mexico</i>	<i>Technical Support Specialist</i>

APPLICATION STEPS

1. Complete Application Form.
2. Identify position(s) for which you are applying.
3. Provide resume.
4. Provide three professional references, day time phone numbers and email addresses on separate paper.
5. Fax or mail to the appropriate NOWCC Field Office: application form, resume, references, positions selected.

NOWCC Eastern Field Office

- Fax #: 703-243-0706
- Address: 3811 N. Fairfax Drive, Suite 900, Arlington, VA 22203
- Supports the following states:
CT, DC, DE, MA, MD, ME, NH, NJ, NY, PA, RI, VA, VT, WV, Puerto Rico

NOWCC South Central Field Office

- Fax #: 214-744-0052
- Address: 900 Jackson Street, Suite 115, Dallas, Texas 75202
- Supports the following states:
AL, AR, FL, GA, IA, IL, IN, KS, KY, LA, MI, MN, MO, MS, NC, NE, NM, OH, OK, SC, TN, TX, WI

NOWCC Western Field Office

- Fax #: 303-238-2542
- Address: 12136 W. Bayaud Ave., Suite 130, Lakewood, CO 80228
- Supports the following states:
AK, AZ, CA, CO, HI, ID, MT, ND, NV, OR, SD, UT, WA, WY