



HOURLY EMPLOYMENT APPLICATION

Desert Research Institute
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Equal Employment Opportunity/Affirmative Action Employer

The Desert Research Institute (DRI) is an affirmative action/equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identity or expression, genetic information, national origin, age, political affiliation, disability status, protected veteran status or any other characteristic protected by law. DRI employs only U.S. citizens and persons lawfully authorized to work in the United States.

Last Name _____ First Name _____ Other Last Names _____

Address _____ City _____ State _____ Zip _____

Email Address _____ Phone # _____ Alt. Phone # _____

Position Applying For: _____ How did you learn about this opening? _____

Are you 18 years of age or older?	Yes	No	Can you provide proof, if hired, that you are eligible to work in the United States?	Yes	No
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Have you ever been employed at Nevada System of Higher Education?	Yes	No	If yes, From _____ To _____
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EDUCATION

High School /GED/or Equivalent

Did you graduate from high school or receive a GED certificate?	Yes	No
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Vocational/Technical/Training or Certification (Business, Industrial, Military)

Name of School	Certificate Obtained
City _____ State _____	Date Last Attended _____
Name of School	Certificate Obtained
City _____ State _____	Date Last Attended _____

Undergraduate/Graduate Education

Name of College	Date Last Attended	Degree Obtained: Yes No
City _____ State _____	Major _____	Month/Year: ____/____
Name of College	Date Last Attended	Degree Obtained: Yes No
City _____ State _____	Major _____	Month/Year: ____/____
Name of College	Date Last Attended	Degree Obtained: Yes No
City _____ State _____	Major _____	Month/Year: ____/____

EMPLOYMENT HISTORY

Complete all relevant sections (indicating “**SEE RESUME**” is not acceptable). List present or most recent employment first, and account for all times during the past 10 years, including periods of unemployment.

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

EMPLOYMENT HISTORY (CONT.)

Complete all relevant sections (indicating “**SEE RESUME**” is not acceptable). List present or most recent employment first, and **account for all times during the past 10 years**, including periods of unemployment.

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

Name of Employer	Dates of Employment (mo. and yr.) From: To:	
Street Address	City	State
Position Title	Average Hours Worked Per Week:	
Supervisor & Title	Telephone #	May we contact your supervisor? Yes No
Reason for Leaving	Final Hourly Rate:	
Primary Duties and Responsibilities		

Attach additional sheets if necessary.

PROFESSIONAL REFERENCES

Please list three (3) persons not related to you, who have knowledge of your work qualifications, and can serve as references for you.

Name & Title	Place of Employment	Telephone #	Email Address

SPECIAL SKILLS/PROFESSIONAL ASSOCIATIONS/LICENSURES

List any computer software, office equipment, laboratory or instrument technology you have experience with that maybe applicable to this position.

List any additional training, correspondence courses/seminars, professional memberships, certificates or licenses you have earned that add to your qualifications for this position.

Typing Speed, if applicable to position: _____ /wpm	/correct wpm, if known
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PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION

I certify that the information on this application and its supporting documents is accurate and complete. I understand and agree that failure to fully complete the form, or misrepresentation or omission of facts, represents grounds for elimination from consideration for employment, or termination after employment if discovered at a later date. I authorize Desert Research Institute (DRI) to investigate, without liability, all statements contained in this application and supporting materials. I authorize references and former employers, without liability, to make full response to any inquiries in connection with this application for employment. If employed, I will be required to furnish proof of eligibility to work in the United States, and to comply with DRI and departmental policies.

Applicant Signature: _____ Date: _____