



# Application for Employment Bighorn Divide & Wyoming Railroad

405 East 1st St., PO Box 387  
Shoshoni, WY 82649  
(307) 876-2624  
Fax: (307) 876-2406

## An Equal Opportunity Employer

Bighorn Divide and Wyoming Railroad does not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants be given equal opportunity and that selection decisions be based on job-related factors.

*Answer each question fully and accurately. No action can be taken on this application until you have answered all questions. Use blank paper if you do not have enough room on this application. PLEASE PRINT, except for signature on back of application. In reading and answering the following questions, be aware that none of the questions are intended to imply illegal preferences or discrimination based upon non-job-related information.*

Positions Applied For:		Date:	
Last Name:	First Name:	Middle Name:	
Address:	City:	State:	Zip Code:
Telephone numbers:		Social Security Number	
		Last Four Numbers	

Have you ever filed an application with BDW before?  Yes  No  
If "yes," please give date. \_\_\_\_\_

Have you ever been employed with BDW before?  Yes  No  
If "yes," please give hire date and separation date. \_\_\_\_\_

If hired, can you furnish proof that you are eligible to work in the United States?  Yes  No  
On what date would you be available for work? \_\_\_\_\_

Check all that apply.  
Are you available to work:  Full Time  Part Time  Temporary  Weekends  Evenings  Nights  Days

List any BDW areas in which you WILL NOT accept employment: \_\_\_\_\_

Have you ever been convicted of any Felonies?  Yes  No  
If "yes," please explain: \_\_\_\_\_

Please tell us where you heard about this position:

- Employment Agency     Friend     Newspaper     Radio     Relative

# Education

	High School / GED				Voc / Technical				Undergraduate College / University				Graduate / Professional			
School Name and Location <i>Include City and State</i>																
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4	1	2	3	4
GED/Diploma/Degree																
Describe Course of Study																
Describe any honors you have received																

List professional, trade, business or civic activities and offices held. *Exclude memberships which would reveal sex, race, color, religion, national origin, age, disability or other protected status.*

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## Skills and Qualifications

Summarize any special job-related skills acquired from employment, volunteer work or other experience.

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## References

Give the name, address (including city and state), and telephone number of at least three references whom are not related to you and are not previous employers.

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# Employment Experience

This section ***must*** be completed. Resumes ***may not*** be substituted.

List names of employers in consecutive order with present or last employer listed first. Account for all periods of time, including military service and any periods of unemployment. If self-employed, give firm name and supply business references. *A job offer may be contingent upon acceptable references from current and/or former employers.*

Employer		Dates Employed (Month/Year)		Work Performed
Address Including City and State		From	To	
Telephone Number(s)		Hourly Rate / Salary		
Job Title	Supervisor	Starting	Final	
Reason For Leaving				
Employer		Dates Employed (Month/Year)		Work Performed
Address Including City and State		From	To	
Telephone Number(s)		Hourly Rate / Salary		
Job Title	Supervisor	Starting	Final	
Reason For Leaving				
Employer		Dates Employed (Month/Year)		Work Performed
Address Including City and State		From	To	
Telephone Number(s)		Hourly Rate / Salary		
Job Title	Supervisor	Starting	Final	
Reason For Leaving				

Name Of Employer	City, State	Dates Employed (Month/Year)		Hourly Rate / Salary		Reason For Leaving
		From	To	Starting	Final	

Have you worked or attended school under any other name?  Yes  No

If "yes," give names: \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Have you ever been fired from a job or asked to resign?  Yes  No

If "yes," please explain: \_\_\_\_\_

# Driving Record

The following information is requested if you are applying for a position in which you will be required to drive a company vehicle, or railroad equipment for employment purposes. If this section is not completed, you will not be considered for employment in these positions.

## Valid Driver's License

Number: \_\_\_\_\_ State: \_\_\_\_\_ Class: \_\_\_\_\_ Expires: \_\_\_\_\_

Have you been convicted for, or had a completed state action to cancel, revoke, suspend, or deny a motor vehicle drivers license for, operating a motor vehicle while under the influence or impaired by alcohol or a controlled substance in the last 36 months?  Yes  No

If "yes," please give date(s) \_\_\_\_\_

Traffic Violations:

Date(s): \_\_\_\_\_ Location: \_\_\_\_\_

Type: \_\_\_\_\_

Traffic Violations:

Date(s): \_\_\_\_\_ Location: \_\_\_\_\_

Type: \_\_\_\_\_

## Applicant's Statement

Please read each statement carefully before signing.

I certify that all information provided during this employment application process is true and complete. I understand that any false information or omission may disqualify me from further consideration for employment and may result in my dismissal if discovered at a later date.

I understand that the Bighorn Divide & Wyoming Railroad, Inc. or its agents may investigate my background to ascertain any and all information of concern to my record, whether same is of record or not, and I release employers and persons named herein from all liability for any damages on account of furnishing such information.

I agree and understand that under the Fair Credit Reporting Act, Public Law 91-508, I have been told that this investigation may include an investigating Consumer Report, including information as to my character, mode of living, work habits, performance, and experience, along with reasons for termination from past employment.

I agree to furnish such additional information and complete such examinations as may be required to complete my application file.

I agree and understand that this Application for Qualification in no way obligates Bighorn Divide & Wyoming Railroad, Inc. to employ or hire the applicant.

I hereby consent to a pre and/or post-employment drug screening as a condition of employment, if required.

Regardless of whether or not I become employed by the company, I recognize that this application is not and should not be considered a contract of employment. I understand employment at the company is on an at will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the company's, unless specifically provided otherwise in a written contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed written document.

I have read, understand, and by my signature, consent to the preceding statements.

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

This application will remain active for a limited time. Ask the organization's representative for details