April 2025

### VOLUNTEER APPLICATION An Equal Opportunity Employer

If you believe you require an acc	ommodation during the	selection pi	rocess, please contact	us to make ap	ppropriate arrangements.	
NameDate						
Address					de de mode, elem se mode se para elem <u>antique antique de co</u> nte con a participa de la mode de consecue de consecu	
City	the control of the co	Stat	teZip Co	ode		
Email address:				alleng opposition of the grant of the gold of the second of the second opposition of the gold of the g		
Telephone(s) Home ()	Ce	ell ( <u>)</u>	V	Vork ()		
Position Applied for			gas, at ay ngay nagay na taon nga ay na angay ng nga nga nga nga nga nga nga nga nga			
How did you hear about this pos	sition?   Advertisem	nent □ Wa	alk-In 🛚 Referral (b	y whom?)		
□ Other (explain)				Bijlion Billiog palvanna a sannaka asahari hakaran fasan kapilin da yapa yakna kar		
lf offered employment, when wil	I you be available to b	egin?				
What type of employment will yo	ou accept?	□ Full-Ti	me □ Part-Tir	ne	☐ Temporary	
Will you be available for shift wo	ork?		🗆 Yes	s □ No		
Will you be available to work we	ekends and/or holida	ys if neces	sary? 🛚 Yes	s □ No		
Have you been given a job descention				s □ No		
Do you understand the job requi	irements?		🗆 Yes	s □ No		
Can you perform the essential fu	unctions of this job wit	h or witho	ut reasonable			
To qualify for employment, applicants must be at least 18 years of age unless otherwise specified in the job announcement. If offered employment, can you furnish proof of age? □ Yes □ No						
After an offer of employment, cawork in the United States?	n you submit verificat	ion of you	r legal right to □ Yes	s □ No		
List other names, if any, you have used						
EDUCATION RECORD						
Did you graduate from high scho	ool or receive a GED			□No		
School Name	Location	Hours Earned	Diploma, Degree, or Certificate	Мајо	or Field of Study	
Business/Technical/Vocational 1.						
2.						
College/University (Undergraduate) 1.						
2						
Graduate School						

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LICENSES (Optional, unless re	equired for the position for which you are now applying.)						
	List current licenses, certifications, or registrations required for the position for which you are applying. Indicate types, state license numbers, and expiration dates.						
Answer only if position requires	s.						
Do you possess a valid driver's	license?   Yes  No						
If so, license expires	ClassRestrictions (if any)	era ana anna ann agus maga ay ay ay ay ay anna an agus agus an an air agus agus an air agus an ann agus agus a					
For positions that require typing	g: I certify that I can type at a speed ofWPM.						
In addition to English, list any o	ther language abilities you possess.						
Verbal fluency in		t - to a supply place to the state of the supply of the supply of the supply of the state of the supply of the sup					
Written fluency in							
List any special skills you posse	ess and/or equipment or office machines you can operate.						
OTHER INFORMATION		The section of the se					
Have you ever been disciplined	l in your employment related to workplace violence?	🗆 Yes 🗆 No					
If yes, please explain.							
Do you presently use illegal dru	gs (including marijuana)?	□ Yes □ No					
Have you ever been employed	by <b>[Employer]</b> ?	□ Yes □ No					
If yes, please provide the follow							
	Position Title						
	Reason for Separation						
-							
Are you related to anyone who	is currently employed by [ <i>Employer</i> ]?	□ Yes □ No					
If yes, please provide the follow	ing information:						
Related person's name	Department						

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#### FOR ALL POSITIONS:

- The criminal history of an applicant will only be considered after the final interview which is conducted in person or an offer of employment has been made, whichever occurs first.
- The White Pine Public Museum may, before selecting an applicant as a finalist or extending a
  conditional offer, notify the applicant of any provisions of law that disqualify a person with a
  particular criminal history from employment in a particular position.
- A record of conviction will not necessarily bar the applicant from employment. Factors to be considered when looking at records of criminal history include:
  - Length of time passed since the offense;
  - Age of applicant at the time of the offense;
  - Severity and nature of the offense;
  - Relationship of the offense to the position applying for; and
  - o Evidence of rehabilitation of the applicant.
- The following will not be considered:
  - Arrests which did not result in a conviction;
  - Record of convictions that were dismissed, expunged, or sealed; and
  - Infractions or misdemeanors for which a sentence of imprisonment in a county jail was not imposed.

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#### **EMPLOYMENT HISTORY**

Provide information regarding all paid employment (include military employment if duties/assignments relate to the job you are applying for). Volunteer work which may be related to the position for which you are applying should also be provided. Describe your most recent position first; then list other positions in order held. Use a separate block for each position, even if with the same employer. Use additional sheets if necessary. Do **NOT** use references such as "See Résumé" in place of completing this section.

May we contact all emplo	yers listed? (Attach a li	st of any exceptions with an explanation.	) □ Yes □ No						
Present EmployerPresent Position									
Address		From (Mo/Yr)	To (Mo/Yr)						
City		□ Full-Time (30+ hrs/wk)	☐ Part-Time (<30 hrs/wk)						
State	Zip Code								
Supervisor's Name/Title Related Duties:		Telepho							
Reason for Leaving:									
Employer		Position							
Address		From (Mo/Yr)	To (Mo/Yr)						
City		☐ Full-Time (30+ hrs/wk)	☐ Part-Time (<30 hrs/wk)						
State	Zip Code								
Supervisor's Name/Title Related Duties:		Telephone ()							
Reason for Leaving:									
Employer		Position							
Address			To (Mo/Yr)						
City		□ Full-Time (30+ hrs/wk)	☐ Part-Time (<30 hrs/wk)						
State	_Zip Code								
Supervisor's Name/Title Related Duties:		Telepho	one( <u>)</u>						
Reason for Leaving:									

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Employer		Position	
Adda			To (Mo/Yr)
City			☐ Part-Time (<30 hrs/wk)
State			
Supervisor's Name/Title Related Duties:			one( <u>)</u>
Reason for Leaving:			
Employer	,	Position	
		- 44.04)	To (Mo/Yr)
City		F F # F (00 : 1 (-1)	☐ Part-Time (<30 hrs/wk)
State			
Supervisor's Name/Title Related Duties:			one( <u>)</u>
Reason for Leaving:			
Please state below any of may include significant acrequested in this employn	complishments, previous	ould be helpful in determining your qualific ous career highlights, or any other relevan	cations for this position. You t information that is not
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	EDGINEN 13
Please REA	AD ALL of the following statements and INITIAL EACH of the lines to indicate you have read and understand statements. If you have any questions, contact the Museum's Executive Director (775) 289-4710
	All offers of employment and all information regarding compensation and other terms and conditions of employment will be made in writing. Verbal statements may not be relied upon.
<del></del>	This application is the property of the White Pine Public Museum and will become part of my personnel file if I am hired.
	I authorize the <b>White Pine Public Museum</b> to conduct a comprehensive review of my background which may include verification of employment, educational background, criminal/court history records check; credit report check; military records check; drug test for safety sensitive positions; character references, and other publicly available information deemed to be job related. In addition, if the position for which I am applying requires driving a vehicle, I authorize the <b>White Pine Public Museum</b> to conduct a Department of Motor Vehicles (DMV) search. If the position for which I am applying involves contact with minors or with any persons having diminished capacity to care for themselves, a search of government sex offender registries may be conducted. I further authorize the <b>White Pine Public Museum</b> to contact any institution and/or licensing authority to verify my possession of education, licenses, and/or certificates which may qualify me for employment.
	In exchange for the <b>White Pine Public Museum's</b> consideration of my employment application, and/or any continued employment with the <b>White Pine Public Museum</b> , I authorize anyone possessing information to furnish it to the <b>White Pine Public Museum</b> upon request, and I release the organizations and all individuals providing the information or acquiring the information, including the <b>White Pine Public Museum</b> , from all claims, liability, and damages whatsoever claimed to be related to furnishing, obtaining, or using said information. This release applies to, but is not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.
,	I further understand this consent will apply during the entire course of my employment with the <b>White Pine Public Museum</b> should I obtain such employment. I understand and agree this consent shall remain in affect indefinitely.
	I hereby certify that all statements made in this application are true. I understand that any false statement of material facts herein may cause forfeiture on my part of all rights to any employment with the White Pine Public Museum. I understand that any misrepresentation, falsification, or material omission of information may result in my failure to receive an offer, or if I have been hired, in my dismissal from employment regardless of length of employment. I understand that neither this document nor any offer of employment from the White Pine Public Museum constitutes an employment contract unless a specific contract document to that effect is executed. I agree to undergo any job-related drug screening and physical examination upon conditional offer of employment. I understand that the White Pine Public Museum is not requesting genetic information from the drug screening or the physical examination and that the person administering the examination should not provide genetic information to the White Pine Public Museum. I further understand and agree that this paragraph applies to any information supplied by me at a later date as part of this application.
***************************************	Per NRS 281.060 (2), I opt to exercise my rights by voluntarily attaching a copy of my DD214. NRS 281.060(2) states preference must be given, <i>if qualifications of applicants are equal</i> : a) first, to an honorably discharged military personnel of the United States who is a citizen of Nevada; and b) second, to other citizens of Nevada.
Additionally	, my signature below certifies that the information provided is true and correct to the best of my knowledge.
Signature of	of Applicant Date