

Application for Employment

<u>All</u> questions must be answered carefully and completely. If you have a resume you may attach it, but you **MUST** fill in the required information <u>on the application form</u>.

Number and Street Message Phone ()	
Current Address Phone No. () Number and Street Message Phone ()	
Number and Street Message Phone ()	
Number and Street Message Phone ()	
List all prior addresses for the last 7 years:	
Date: From Date To Number and Street City State	Zip
Date: From Date To Number and Street City State	Zip
Date: From Date To Number and Street City State	

EMPLOYMENT DESIRED

Position Desired		Salary Desired
Check type of employment desired:	☐ Full Time	□ Part Time □ Temporary
If not Full Time, days available:	□ Mon □ Tue	□ Wed □ Thur □ Fri □ Sat □ Sun
If not Full Time, hours available		
On what date would you be available	e to start work?	
Are you willing and able to work over	ertime?	Yes No

PERSONAL INFORMATION

Have you ever applied to or been employed with us before? Yes No If yes, give date
Do you have any friends or relatives working for the District? \Box Yes \Box No
If yes, state name(s) and relationship
Are you currently employed? \Box Yes \Box No If yes, may we contact your employer? \Box Yes \Box No
If hired, would you have a reliable means of transportation to and from work? \Box Yes \Box No
Can you travel if the job requires it? Yes No
Are you able to perform the essential functions of the job for which you are applying? \Box Yes \Box No
Are you at least 18 years old? \Box Yes \Box No If under 18, hire is subject to verification that you are of minimum legal age.
If hired, can you present evidence of your U.S. citizenship or proof of your legal right to live and work in this country? Yes No Proof of citizenship or immigration status will be required upon employment.
Are you able to communicate in any languages other than English? Yes No If Yes, indicate language and level of proficiency (speaking and writing):

EMPLOYMENT EXPERIENCE

Start with your most recent job and give last 5 years. Feel free to attach additional pages if necessary. You <u>MUST</u> complete this section even if attaching a resume. Account for all periods of unemployment.

1) Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Dl N.		I I and a D	/9 - 1	
Phone No.		Hourly Rate/Salary		
		Starting	Final	
Job Title	Supervisor			
Reason For Leaving				
		Dates Employed		
2) Employer		Dates E	mployed	Work Performed
2) Employer		Dates E From	mployed To	Work Performed
2) Employer Address				Work Performed
				Work Performed
Address		From	То	Work Performed
		From		Work Performed
Address	Supervisor	From Hourly R	To ate/Salary	Work Performed

EMPLOYMENT EXPERIENCE - continued

3) Employer	Dates Employed		Work Performed
	From	То	
Address			
Phone No.	Hourly Rate/Salary		
	Starting	Final	
Job Title Supervisor			
Reason For Leaving			
4) Employer	Dates Employed		Work Performed
	From	То	
Address			
Phone No.	Hourly Rate/Salary		
	Starting	Final	
Job Title Supervisor			
Reason For Leaving			

EDUCATION AND TRAINING

Type of School	Name and Location of School (Provide full names of schools)	Dates Attended	Name and Date of Degree Earned	Major and Minor Fields of Study
High School or Trade School		Do not supply dates for high school	Diploma? □ Yes □ No	
Tech. School				
College				
College				

WATER AND WASTEWATER TRAINING AND CERTIFICATIONS

Water:	
Wastewater:	

SPECIAL SKILLS AND QUALIFICATIONS

Computer Software: _____

PROFESSIONAL REFERENCES

List below three people you have worked with for at least one year (do not list supervisors). Do not list relatives or friends unless you have worked with them.

Name	Occupation Email Address:
	Company where you worked together:
Name	Occupation
Phone No	Email Address:
No. years acquainted	_Company where you worked together:
Name	Occupation
Phone No.	Email Address:
No. years acquainted	_Company where you worked together:

APPLICANT'S CERTIFICATION AND AUTHORIZATION

Please read carefully and sign/date below.

I hereby certify I have not knowingly withheld any information which might adversely affect my chances of employment and the answers given by me are true and correct to the best of my knowledge. I further certify I, the undersigned applicant, have personally completed this application. I understand any omission or misstatement of material fact on this application or any documents used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

I hereby authorize any present employer or supervisor, past employer or supervisor, college, university or other institution of learning, private business, military branch or the National Personnel Records Center, personal reference, and/or other persons, to give records or information they may have concerning my past or current employment, earnings history, educational records, health, or character to the District or its representative. I voluntarily, knowingly and unconditionally release any named or unnamed informant from any and all liability resulting from the furnishing of this information. A photographic or faxed copy of the authorization shall be as valid as the original. I further understand that if I am made a conditional job offer, additional background checks or verification of eligibility may be required.

I hereby agree to submit to binding arbitration all disputes and claims arising out of the submission of this applicant. I further agree, in the event that I am hired by the District, that all disputes that cannot be resolved by informal internal resolution which might arise out of my employment with the District, whether during or after that employment, will be submitted to binding arbitration. I agree that such arbitration shall be conducted under the rules of the American Arbitration Association. This application contains the entire agreement between the parties with regard to dispute resolution, and there are no other agreements as to dispute resolution, either oral or written.

I HAVE READ AND UNDERSTOOD THE ABOVE:

Applicant's	Signature
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Date

Applicant's Name Printed