Application For Employment



We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related mental or physical disability, or any other legally protected status.

	(PLEAS	E PRINT)			
Position(s) Applied For	•	•	Date of Applicati	on	
How did you learn about us?					
Advertisement	Friend Walk-	In			
☐ Employment Agency	☐ Relative ☐ Othe	er			
					<u>'</u>
Last Name	First Name	M	iddle Name		
Address Number	Street	City	State	Э	Zip
Telephone Number(s)	Day	Evening	Messages		
Email Address					
If you are under 18 years of	of age, can you provide red	quired proof of your el	igibility to work?	☐ Yes	∐ No
Have you ever filed an app	olication with us before?			☐Yes	□No
riave yearever mea air app	meadon man de berere.		If yes, give date	□ 162	
			ii yoo, givo dato		
Have you ever been emplo	byed with us before?		-	☐ Yes	∐ No
			If yes, give date		
Are you currently employe	d?			Yes	□No
May we contact your present employer?				∐ Yes	∐ No
Are you prevented from la	wfully becoming employed	in this country because	se of Visa or	Yes	□No
Immigration Status?					
Proof of citizenship or immigration status will be required upon employment.					
On what date would you b	e available for work?				
Are you currently available	e to work:	☐ Part Time ☐	Temporary		
Are you currently on "lay-off" status and subject to recall?					□No
Can you traval if a job race	uiros it?			Yes	—
Can you travel if a job requires it?					∐ No

- WE ARE AN EQUAL OPPORTUNITY EMPLOYER -

Education

	High School	Undergraduate College/University*	Graduate/ Professional*
School Name, Location and Phone Number			
Years Completed			
Describe Course of Study			
Describe any specialized training, apprenticeship, skills and extra curricular activities			
Describe any honors you have received			
State any additional information you feel may be helpful to us in considering your application			

*Education beyond the requirements on the job description or not related to the job for which you are applying need not be listed.

Indicate any languages, other than English, that you can speak, read and/or write.					
	FLUENT	GOOD	FAIR		
SPEAK					
READ					
WRITE					

List professional, trade, business or civic activities and offices held. You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:				

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities which relate to the job for which you are applying. You may exclude organizations which indicate race, color, religion, gender, national origin, mental or physical disability or other protected status.

Employer		Dates Employed		Work Performed
		From	То	
Telephone Number(s)				
Address				
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	
Telephone Number(s)				
Address				
lob Title	Supervisor			
Reason for Leaving	I			
Employer		Dates E	mployed	Work Performed
		From	То	
Telephone Number(s)				
Address				
lob Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	
Telephone Number(s)				
Address		1	1	
Address				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

References

Give name, address and telephone number of three business references who are not related to you.

	Name	Address	Telephone Number
1.			
2.			
3.			
			Dyss DNs

Do you have the physical and mental ability to perform the tasks on the <u>attached</u> job description, with or without accommodation?

☐ Yes ☐ No

(If accommodation is necessary, please describe below)

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand and acknowledge that the policy of the Montecito Water District (MWD) is such that the existence of a criminal conviction will not necessarily disqualify my application for employment.

I understand that if offered employment, the offer may be contingent on passing a preemployment alcohol and drug screen and a pre-employment physical and voluntarily agree to submit to these procedures. I also understand that I will be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand and hereby acknowledge that any employment relationship with MWD is of an "at will" nature, which means that the employee may resign at any time and the MWD may discharge the employee at any time with or without cause. I also understand that this "at will" employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of MWD.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the MWD.

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Montecito Water District, I am entitled to copies of any such records obtained, unless I mark the checked box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

☐ I waive receip	ot of a copy of any public record describe	ed in the paragraph above.
Signature of Applicant:		Date:

NOTES: