

Woodmoor Water and Sanitation District No.1

Application for Employment

Apply at: 1845 Woodmoor Drive, P.O. Box 1407, Monument, CO 80132 (719) 488-2525 Fax (719) 488-2530

As an Equal Opportunity Employer, all applicants are considered without regard to otherwise qualified person's race, creed, color, sex, age, national origin, ancestry, or disability, subject to such reasonable requirements as may be permitted by law.

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT FOR SIGNATURE

Date _____

Name _____
Last
First
Middle

Present Address _____
Number
Street
City
State
Zip

How long at present address? _____ Social Security Number _____ - _____ - _____

Home Phone _____ Cell Phone _____

E-mail Address _____

Do you possess a valid driver's license? _____ Driver's license number _____ State _____

Class _____ Type _____ Commercial (CDL) _____ Endorsements _____ Expiration date _____

Position applied for (1) _____ If under 18, please list age _____

Salary desired (2) _____ Are you available to work overtime? _____

Can you work on weekends? _____ Can you work evenings? _____

Employment status desired _____ FULL TIME _____ PART-TIME _____ REGULAR _____ TEMPORARY

When would you be available to start? _____

How were you referred to our Company? _____

EDUCATION, TRAINING, AND EXPERIENCE

NAME AND TYPE OF SCHOOL (HIGH SCHOOL, COLLEGE, UNIVERSITY, VOCATIONAL)	CITY, STATE	YEARS COMPLETED	DID YOU GRADUATE? YES OR NO	DIPLOMA, DEGREE, or CERTIFICATE

Have You Ever Been In The Armed Forces? _____ Yes _____ No

Branch _____ Total Years of Service _____ Rank _____

Are you now a member of the National Guard or Active Reserves? _____ Yes _____ No

PERSONAL INFORMATION

Have you ever applied to or worked for the District before? ___ Yes ___ No

If yes, please explain (include date): _____

Do you know of any friends, relatives, or acquaintances working for the District? ___ Yes ___ No

If yes, name of WWSD employee _____

If hired, what form of transportation would you use to/from work? _____

Have you had any accidents during the past three years? ___ Yes ___ No How many? _____

Have you had any moving violations in the past three years? ___ Yes ___ No How many? _____

If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the United States? ___ Yes ___ No

If hired, would you be willing to submit to and pass a controlled substance test? ___ Yes ___ No

If hired, would you be able to provide a clean DMV driving record of the past 3 years? ___ Yes ___ No

Are you able to perform the essential functions of the job for which you are applying, either with / without reasonable accommodations? ___ Yes ___ No

If no, describe the functions that cannot be performed _____

Note: The District complies with the ADA and considers reasonable accommodations measures that may be necessary for eligible applicants/employees to perform essential functions.

Have you ever been convicted of a criminal offense? ___ Yes ___ No

If yes, please explain number of conviction(s), nature of the offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation.

Please list three references you have know for more than one year other than relatives or previous employers.

Name	Position	Company	Address	Phone

OFFICE USE ONLY

Typing ___ Yes ___ No _____ WPM 10-key Yes ___ No ___ Computer ___ Yes ___ No

List of software experience and proficiency

WORK EXPERIENCE

Please list your work experience for the **past ten years** beginning with your most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.

Name of Employer _____				
Address _____	City _____	State _____	Zip _____	Phone Number _____
Employment Dates _____	to _____	Final Hourly Pay or Salary _____		
Your last job title _____	Name of last Supervisor _____			
Reason for leaving (please be specific) _____				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____				

May we contact your present employer? ___ Yes ___ No

Name of Employer _____				
Address _____	City _____	State _____	Zip _____	Phone Number _____
Employment Dates _____	to _____	Final Hourly Pay or Salary _____		
Your last job title _____	Name of last Supervisor _____			
Reason for leaving (please be specific) _____				
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____				

Please provide a brief explanation of any lapse in employment history. _____

Name of Employer _____

Address _____ City _____ State _____ Zip _____ Phone Number _____

Employment Dates _____ to _____ Final Hourly Pay or Salary _____

Your last job title _____ Name of last Supervisor _____

Reason for leaving (please be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____

Name of Employer _____

Address _____ City _____ State _____ Zip _____ Phone Number _____

Employment Dates _____ to _____ Final Hourly Pay or Salary _____

Your last job title _____ Name of last Supervisor _____

Reason for leaving (please be specific) _____

List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company. _____

Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position which you are applying.

I certify that all information provided on this application is correct. I understand that any falsification, misrepresentation or willful omissions may constitute grounds for termination. I understand the District may obtain information from others and I release District employees and elected officials, and any other person providing information concerning me, from any liability or claim of any kind related to any inquiry or response to any inquiry concerning this application or my prior education, work experience and performance. Further, I understand and agree that my employment with the District is "AT-WILL" and may be terminated with or without cause, a statement of reasons, or a hearing, just as any employee may resign at any time, for any reason.

Signature _____ Date _____