

- Check the appropriate box if you possess any of the following:

<input type="checkbox"/> High School Diploma	<input type="checkbox"/> G.E.D. Certificate
<input type="checkbox"/> California High School Proficiency Certificate	<input type="checkbox"/> Post Graduate _____ years
- Highest grade completed (circle one) Grade School: 5 6 7 8, High School: 9 10 11 12, College: 1 2 3 4

Last High School Attended				City & State		
College or Universities	City/State	From	To	Units Completed	Major	Degree

Title and Number of any license, certificate or credential relevant to this position.
Attach copy of any required certification.

Title	Number	Issued by	Expiration Date

Office Skills: List typing WPM, Shorthand, Office Machines, Computers and other special skills pertinent to position desired.

Additional Information: You may include any comments that show further qualification for this position.

Indicate any foreign language you can speak, read, and/or write.

	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

References: List three persons, other than relatives (include name, address, & phone number.)

1)

2)

3)

EXPERIENCE: List most recent experience first, including paid and voluntary experience that you feel qualifies you for this job. This section must be completed. If more space is needed, attach extra sheets. A resume may be attached for supplemental information only. **Do not indicate "Refer to Resume".** *If a Supplemental Questionnaire is required, it must accompany this application.*

Date of Employment From: _____ To: _____		Exact Title of Position	
Name of Firm/Organization		Employer Address	
Name /Title of Supervisor		Phone Number	
Hrs worked per week:	Number of Employees You Supervise:	May we contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you still Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:			
Duties: _____ _____			

Date of Employment From: _____ To: _____		Exact Title of Position	
Name of Firm/Organization		Employer Address	
Name /Title of Supervisor		Phone Number	
Hrs worked per week:	Number of Employees You Supervise:	May we contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you still Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:			
Duties: _____ _____			

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Name of Firm/Organization		Employer Address	
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Hrs worked per week:	Number of Employees You Supervise:	May we contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you still Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:			
Duties: _____ _____			

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Name of Firm/Organization		Employer Address	
Name /Title of Supervisor		Phone Number	
Hrs worked per week:	Number of Employees You Supervise:	May we contact Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are you still Employed? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving:			
Duties: _____ _____			

_____ Initials	I hereby certify that I have not knowingly withheld any information that might adversely affect my chance for employment and that the answers given by me are true and correct. I further certify that I have personally completed this application. I understand that any omission of misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediately discharge if I am employed, regardless of the time elapsed for discovery.
_____ Initials	I hereby authorize the Sunnyslope County Water District to thoroughly investigate all statements made by me in this application, my references, work records, educational institutions, and other matters related to my suitability for employment and, further, authorize the references and employers I have listed to disclose to the Sunnyslope County Water District any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the Sunnyslope County Water District, my past and current employers, and all other persons, corporations, partnerships, institutions, and associations from any and all claims, demands, or liabilities arising out of or in any way related to such investigations or disclosure.
_____ Initials	I understand that nothing contained in this application or conveyed during any interview which may be granted, or during my employment, if hired, is intended to create an employment contract between me and the Sunnyslope County Water District. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period, but is at will, and may be terminated at any time, with or without prior notice, at the option of either myself or the Sunnyslope County Water District, and that no promises or representation contrary to the foregoing are binding on the Sunnyslope County Water District unless made in writing and signed by me and Sunnyslope County Water District's designated representative.
_____ Initials	If hired, I agree to conform to the Employee Handbook (Personnel Policies & Procedures Manual) of the Sunnyslope County Water District.
_____ Date	_____ Applicant's Signature

We ask that you complete the following information, to assist us in identifying effective recruitment sources. How did you learn of this recruitment?

- Newspaper or Publication _____
- Community Organization _____
- District Employee
- Friend or Relative
- Other _____

NOTICE: *The District has a policy of requiring a physician's physical fitness exam, together with urine drug testing of persons who have been offered employment. Individuals who are determined by the physician not to be physically fit for duty, or who test positive for controlled substances, will not be employed. If you have reason to believe that you will not pass a physician's physical examination, or will test positive for the presence of controlled substances, or if you are unwilling to consent to such an examination or test if offered employment, it is recommended that you not submit an application.*