

## Columbia Valley Water District 6229 Azure Way Maple Falls, WA 98266

## **Employment Application**

All applicants will receive consideration for employment without regard to race, color, religion, sex, pregnancy, age, marital status, national origin, physical or mental handicap. The following information is requested in order to help us make the best possible placement within the District. Our District subscribes to a DRUG FREE WORK PLACE. YOU MAY BE REQUIRED TO SUBMIT TO A DRUG SCREEN AS PART OF YOUR INITIAL APPLICATION PROCESS. All portions of this application pertaining to you must be completed. Please do not refer to the information on your resume.

		Арр	licant l	nform	ation				
Full Name:					Date:				
	Last	First				<i>M.I.</i>			
Address:	Street Address				Apartment/Unit #				
	City		,			State	ZIP Code		
Phone:			{	Email					
Date Available: Social Securit			y No.:			Desired S	Salary:\$		
Position App	plied for:				<del> </del>				
Are you a ci	tizen of the United States?	YES	NO	if no, a	are you	authorized to wor	YES	NO	
Have you e	ver worked for this compan	YES y? □	NO	If yes,	when?_				
Have you e	ver been convicted of a felo	YES ony? [	NO						
If yes, expla	in:				<u> </u>				
			Educ	ation		<u>.</u>			
High Schoo	l:		Address:						
From:	To:	Did you gi	raduate?	YES	NO	Diptoma::			
College:	<u></u>		Address:						
From:	То:	Did you g	raduate?	YES	NO □	Degree:			
Other:			Address:						

From:	To: Did you graduate	YES	NO	Degree:
	Refe	rences		
Please list three	e professional references.	•		
Full Name:				Relationship:
Company:				Phone:
Address:		o ngawati sarifi		en el Company de la compan La company de la company d
				Relationship:
Company				Phone:
Address:				
<b>.</b>				Relationship:
Compone				Phone:
Address:				
	Previous I	≣mployn	nent	
Company:				Phone:
Address:				
Job Title:	Starting S	Starting Salary:\$		
Responsibilities:				
From:	To:	Reasor	n for Leav	ing:
May we contact y	our previous supervisor for a reference?	YE\$	NO	
		18.80 E. 18.51 - 20	STEELS	
Company:				Phone:
Address:				
Job Title:	Starting S			
Responsibilities:				
From:	To:	Reasor	n for Leav	ing:
May we contact y	our previous supervisor for a reference?	YES	ОМ	

Company:			Phone:			
Address:	Supervisor:					
Job Title: Starting S	alary: <u>\$</u>		Ending Salary:\$			
Responsibilities:						
From: To:	Reason fo	r Leaving:	g:			
May we contact your previous supervisor for a reference?	YES	NO				
Military	Service					
Branch:		From:	То:			
Rank at Discharge:	ank at Discharge: Type of Discharge:					
If other than honorable, explain:						
CONSENT FOR BACKG	ROUND IN	IVESTIGATI	ION			
It is the intent of the District to keep all inform investigation private and confidential. Please read an verify past employment and information given on thi	nd sign the	statement b				
"I hereby agree to have the District Manager of the District anyone necessary to investigate or verify any discuss my background, past performance, or my suit work background discussed by any person so contact defamation, invasion of privacy, or any similar cause what is said about me. I also understand that the inforstatement or omission of fact or facts in connection who offer of employment and/or dismissal from the Discussion."	information tability for ed, and was of action, mation I so with this Ap	on I have give employmen ive all my riagainst anyoupply will be oplication fo	en on this application, or to t. I further agree to have my ghts to bring any action for one contacted as a result of checked and that any false r Employment will result in			
Signature:		·	Date:			