

# APPLICATION FOR EMPLOYMENT

Clinton Water & Sewer Dept.

We consider applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applied For			Date of Application		
How Did You Learn About Us?					
<input type="checkbox"/> Advertisement		<input type="checkbox"/> Friend		<input type="checkbox"/> Employee _____	
<input type="checkbox"/> Employment Agency		<input type="checkbox"/> Relative		<input type="checkbox"/> Other _____	
Last Name		First Name		Middle Name	
Address	Number	Street	City	State	Zip Code
Telephone Number(s)		Date of Birth / /		Social Security Number - -	

Best time to contact you at home is: \_\_\_\_\_:\_\_\_\_\_ AM PM

Driver's License No. \_\_\_\_\_ Expiration Date: \_\_\_\_\_ State Issued: \_\_\_\_\_

Have you ever been convicted of a Felony?  Yes  No

Have you had any accidents during the past 3 years?  Yes  No  
If Yes, how many? \_\_\_\_\_

Have you had any Moving Violations during the past 3 years?  Yes  No  
If Yes, give date \_\_\_\_\_

Do any of your friends or relatives, other than spouse, work here?  Yes  No  
If Yes, state name, relationship and location \_\_\_\_\_

Are you currently employed?  Yes  No

May we contact your present employer?  Yes  No

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status?  Yes  No

Date available for work \_\_\_/\_\_\_/\_\_\_ What is your desired salary range? \_\_\_\_\_

Are you available to work:  Full Time  
 Part Time

Are you currently on "lay-off" status and subject to recall?  Yes  No

Can you travel if a job requires it?  Yes  No

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

<b>EDUCATION</b>				
<b>School</b>	<b>Name and Address of School</b>	<b>Course of Study</b>	<b>Years Completed</b>	<b>Diploma/Degree</b>
<b>High School</b>				
<b>Undergraduate College</b>				
<b>Graduate/Professional</b>				
<b>Other (Specify)</b>				

## Work Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer	<b>Dates Employed</b>		<b>Work Performed</b>
	<b>From</b>	<b>To</b>	
Address			
Telephone Number(s)			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
	<b>Starting</b>	<b>Final</b>	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	<b>Dates Employed</b>		<b>Work Performed</b>
	<b>From</b>	<b>To</b>	
Address			
Telephone Number(s)			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
	<b>Starting</b>	<b>Final</b>	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	<b>Dates Employed</b>		<b>Work Performed</b>
	<b>From</b>	<b>To</b>	
Address			
Telephone Number(s)			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
	<b>Starting</b>	<b>Final</b>	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

Employer	<b>Dates Employed</b>		<b>Work Performed</b>
	<b>From</b>	<b>To</b>	
Address			
Telephone Number(s)			
Starting/Present Job Title	<b>Hourly Rate/Salary</b>		
	<b>Starting</b>	<b>Final</b>	
Supervisor			
Reason for Leaving	May We Contact <input type="checkbox"/> Yes <input type="checkbox"/> No		

**Comments: Include explanation of any gaps in employment.**

**Describe any specialized training, apprenticeship, skills, and extra-curricular activities.**

**Describe any job-related training received in the United States military.**

**List professional, trade, business or civic activities and offices held..**

*You may exclude membership which would reveal race, gender, national origin, age, ancestry, disability or other protected status.*

**ADDITIONAL INFORMATION**

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

**SPECIALIZED SKILLS**

<input type="checkbox"/> Terminal	<input type="checkbox"/> Spreadsheet	Production/Mobile Machinery (list)	Other (list)
<input type="checkbox"/> PC/Mac	<input type="checkbox"/> Word Processing	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Shorthand	_____	_____
WPM ____	WPM ____	_____	_____

*State any additional information you feel may be helpful to us in considering your application.*

**Note to Applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT THE REQUIREMENTS OF THE JOB FOR WHICH YOU ARE APPLYING.**

Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given.

\_\_\_ YES \_\_\_ NO

**PERSONAL/PROFESSIONAL REFERENCES** Do not include family members.

Name	Phone Number	Best Time To Call	Occupation
1.			
2.			
3.			

**PERSON TO BE CONTACTED IN EMERGENCY**

Name	Address	Phone Number	Relationship

**APPLICANT'S STATEMENT**

I certify that answers given herein are true and complete.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood 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 this organization.

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 employer.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**