



**DUCKETT CREEK SANITARY DISTRICT
APPLICATION FOR EMPLOYMENT**

PLEASE PRINT CLEARLY

DATE: _____

NAME: _____ ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____ CELL PHONE: _____ BUS PHONE: _____

EMAIL ADDRESS: _____

POSITION APPLYING FOR: _____ FULL-TIME PART-TIME SEASONAL

PREVIOUS MILITARY SERVICE:

ARE YOU A VETERAN? IF YES, BRANCH OF SERVICE: _____

DATES OF SERVICE: ENTERED: _____ DISCHARGED: _____

THIS SECTION TO BE COMPLETED **ONLY** BY APPLICANTS FOR POSITIONS WHICH REQUIRE DRIVING ON THE JOB. A DRIVING RECORD CHECK WILL BE PERFORMED AS A CONDITION OF ANY JOB OFFER TO SUCH APPLICANTS.

License no.: _____ Class of license: _____

State of Issue: _____ Restrictions: _____

Has your license ever been suspended or revoked? Yes No If yes, on a separate sheet list the details for each occurrence including: the offense, date, charge, place, court and action taken.

EDUCATIONAL BACKGROUND: INCLUDE ALL FORMAL TRAINING PROGRAMS AND ACADEMIC DEGREES. ATTACH ADDITIONAL SHEET IF NECESSARY.

NAME OF SCHOOL OR PROGRAM	LOCATION	CREDITS COMPLETED	DEGREE EARNED	COMPLETE/GRADUATE?

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WORK EXPERIENCE: BEGINNING WITH YOUR MOST RECENT EMPLOYMENT, LIST A COMPLETE STATEMENT OF YOUR WORK HISTORY.

ATTACH ADDITIONAL SHEETS IF NECESSARY

1. POSITION HELD _____ **SALARY** _____

DATES OF EMPLOYMENT from: _____ to: _____

EMPLOYER _____

ADDRESS _____
Street City State Zip

SUPERVISOR'S NAME _____ **TELEPHONE** _____

DUTIES/RESPONSIBILITIES _____

REASON FOR LEAVING _____

2. POSITION HELD _____ **SALARY** _____

DATES OF EMPLOYMENT from: _____ to: _____

EMPLOYER _____

ADDRESS _____
Street City State Zip

SUPERVISOR'S NAME _____ **TELEPHONE** _____

DUTIES/RESPONSIBILITIES _____

REASON FOR LEAVING _____

3. POSITION HELD _____ **SALARY** _____

DATES OF EMPLOYMENT from: _____ to: _____

EMPLOYER _____

ADDRESS _____
Street City State Zip

SUPERVISOR'S NAME _____ **TELEPHONE** _____

DUTIES/RESPONSIBILITIES _____

REASON FOR LEAVING _____

List any additional training, special qualifications, skills or honors you would like considered:

REFERENCES: List the following information for at least three references who may be contacted concerning your work history and background. DO NOT INCLUDE RELATIVES

1. **NAME** _____
ADDRESS _____ **EMAIL ADDRESS** _____
TELEPHONE _____ **CELL** _____ **BUSINESS** _____
HOW DO YOU KNOW THIS PERSON: _____
HOW LONG? _____

2. **NAME** _____
ADDRESS _____ **EMAIL ADDRESS** _____
TELEPHONE _____ **CELL** _____ **BUSINESS** _____
HOW DO YOU KNOW THIS PERSON: _____
HOW LONG? _____

3. **NAME** _____
ADDRESS _____ **EMAIL ADDRESS** _____
TELEPHONE _____ **CELL** _____ **BUSINESS** _____
HOW DO YOU KNOW THIS PERSON: _____
HOW LONG? _____

Do you have any commitments which may restrict your ability to perform your job duties? yes no
If yes, provide details:

Do you have any objection to Duckett Creek making inquiries of your past or present employer(s) regarding your work history? yes no If yes, provide details:

Have you ever been discharged or forced to resign from a position? yes no If yes, provide details
including the name of the employer and the reason for the action taken:

Have you ever been employed by Duckett Creek ? yes no

Do you have any relatives now employed by Duckett Creek ? yes no If yes, list names and his/her
relationship to you:

If you are selected for a position, how soon are you available to start work?

PLEASE READ CAREFULLY BEFORE SIGNING

District policy requires an applicant, when a bona fide job offer has been made, to pass a physical examination (at the District's expense). The pre-employment examination for all candidates includes a drug screen. Failure of the applicant to consent to these inquiries and tests, and depending on the position, a credit check and background check, and skill and other applicable tests, will disqualify the applicant from present and future employment consideration by the District.

Federal law requires that the District hire only United States citizens and lawfully authorized alien workers. If you are selected for a position with the Duckett Creek , you will be required to comply with the requirements of the Immigration and Naturalization Act of 1986. This law requires you to present documentation of your identity and eligibility to work in the US and to complete a federal I-9 form. This form must be completed on the first day of employment for all employees.

It is the policy of the Duckett Creek not to discriminate on the basis of political affiliation, race, color, religion, national origin, sex, age or disability, or other status protected by law except where specific age or physical requirements constitute a bona fide occupational qualification. The job duties will be reviewed with you to determine your ability to perform the essential functions of the position.

CERTIFICATION OF THE APPLICANT – SEE ALSO SEPARATE SHEET ATTACHED. READ CAREFULLY BEFORE SIGNING.

I certify that all the answers and statements herein contained are true to the best of my knowledge and belief. I understand that any misstatement of material facts, or omission of any material facts, will subject me to possible disqualification or dismissal.

SIGNATURE OF APPLICANT: _____ **Date:** _____
(Type Name)

DUCKETT CREEK SANITARY SEWER DISTRICT

CERTIFICATE OF APPLICANT AUTHORIZATION

FOR RELEASE OF INFORMATION

(Read carefully before signing)

I, _____, hereby certify that all statements made on or in connection with my application for employment are true and complete to the best of my knowledge and belief, and I understand and agree that any misstatements or omission of material facts can cause forfeiture on my part of all rights to employment by the Duckett Creek .

I also do hereby authorize all law enforcement agencies, the Veterans Administration, U. S. Army, U. S. Navy, U. S. Air Force, all military agencies, all federal, state or local government agencies, state and federal tax bureaus, credit bureaus, schools, universities, and current and prior employers, to furnish representatives of the District with any and all available information regarding me in order that they may determine my suitability for employment with the Duckett Creek .

I authorize my present and past employers to discuss my character, integrity and reputation with representatives of the District.

I authorize the release of any and all information regarding my employment, credit, or any other information, whether personal or otherwise, by the persons and entities described herein that may or may not be on their records and release such persons and entities from all liability for any damage whatsoever that may issue from furnishing such information to representatives of the Duckett Creek .

A photo copy of this authorization will be considered as effective and valid as the original.

Signature of Applicant (Type Name)

Date

Driver's License Number

State of Issuance