

Metropolitan Water District of Salt Lake & Sandy

APPLICATION FOR EMPLOYMENT

Please fully and accurately answer all questions.
Incomplete applications may not be considered.

Qualified applicants receive equal consideration. No question is asked for the purpose of excluding any applicant due to race, color, national origin, religion, age, sex, disability, or any other factor prohibited by law or regulation.

AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL IDENTIFICATION:

Name _____ Date: _____
Address: _____ Phone: _____

WORK PREFERENCE:

Salary or pay _____
Position desired: _____ you desire: _____ Date available for work: _____
List job benefits, other than wages, you expect or want in order of importance: (1) _____ (2) _____ (3) _____
Describe your prior experience related to this work: _____
Describe any formal schooling or training related to this work: _____
List any licenses, certificates or professional affiliations you may have: _____
List any special skills you may have (computer, machine operation, etc.): _____

DRIVER'S LICENSE INFORMATION:

Do you have a valid drivers license? Yes ___ No ___ Driver License Number _____ Class of License _____ State _____
Have you had your drivers license suspended or revoked in the last three years? Yes _ No _ If yes, give details _____

AVAILABILITY FOR WORK: Please write 'yes' or 'no' in every space provided on the remainder of this page

Type of work: Part time _____ Full time _____ Temporary or short term _____
Shifts or time of day: Day _____ Afternoon _____ Graveyard _____ Rotating _____
Will you work overtime on occasion if necessary? _____ Will you work extra days in the week if necessary? _____
Are you now or do you expect to be engaged in any other business, employment or schooling? _____
Do you have any commitments or agreements with another employer that might affect your employment? _____
Do you have any on-going obligations or other personal commitments that would affect your work schedule? _____

PRESENT EMPLOYMENT:

Are you presently employed? _____ Do you have to give advance notice to your present employer? _____
May we contact your present employer for a reference? _____

PERSONAL:

If requested, would you be willing to take a drug/alcohol screening exam before and/or after employment as a condition of employment? _____
Are you at least 18 years old? _____ Are you legally eligible for employment in the United States? _____

PRIOR EVENTS:

Have you ever worked for or applied for work at this company before? If yes, which position? _____
Have you ever been discharged for cause? _____
Have you ever been convicted of any law violation, except a minor traffic violation? (A criminal record does not automatically bar employment) _____
Have you ever been disciplined for absenteeism? _____ Have you ever been disciplined for tardiness? _____

EDUCATION AND TRAINING:

	School Name City, State	Highest grade or years completed	Grade Point Average	Major Subject(s)	Special Courses
High School or GED					
College or University					
Graduate School					
Other Education					

EMPLOYMENT RECORD: (Give a complete account of your employment. Begin with your most recent or current employment and work back.)

1. Employer _____ Address _____ Phone _____
Main duties _____
From _____ to _____ Starting Pay _____ Leaving pay _____ Supervisor _____
What did you like about this job? _____
What did you dislike about this job? _____
Reason for leaving _____

2. Employer _____ Address _____ Phone _____
Main duties _____
From _____ to _____ Starting Pay _____ Leaving pay _____ Supervisor _____
What did you like about this job? _____
What did you dislike about this job? _____
Reason for leaving _____

3. Employer _____ Address _____ Phone _____
Main duties _____
From _____ to _____ Starting Pay _____ Leaving pay _____ Supervisor _____
What did you like about this job? _____
What did you dislike about this job? _____
Reason for leaving _____

4. Other positions (including periods of military/public services)

EMPLOYER	MAIN DUTIES	FROM	TO	PAY	REASON FOR LEAVING
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

REFERENCES: Give the name, address, and telephone number of three business references who are not related to you.

Name, Title	Phone	Business	Years Acquainted

APPLICANT AGREEMENT: (*Read carefully before signing*)

All information provided by me is true and correct to the best of my knowledge. I understand omissions or misrepresentations may result in rejection of my application or, if employed, may result in subsequent dismissal. I hereby authorize any former employer, person, school, firm or corporation listed hereon, including the District, to answer any and all questions related to employment and agree to release from liability and hold all persons harmless for giving any and all truthful information within their knowledge or records. I understand this is a preliminary application and not a contract to employment. Furthermore, in the event I am employed, my employment shall be completely voluntary and may be terminated at will at any time by either myself or the District. I understand that no one other than the Chair of the Board of Trustees and the General Manager, acting together, has authority to enter into any employment agreement to the contrary. I agree to take a job related physical examination, a drug/alcohol test, submit to a background check, and submit to a reference check, when requested as a condition of employment. I agree to comply with all rules of the District as a condition of employment.

Date: _____ Signature of applicant: _____