



Application
for Employment
Coachella Valley Water District

Today's Date _____ 20 ____

Coachella Valley Water District policy prohibits discrimination on the basis of age, race, color, religion, sex, national origin, citizenship or disability in accordance with applicable state and federal laws

Please print clearly and complete all information requested

POSITIONS APPLYING FOR:

 First Choice

 Second Choice

NAME AND ADDRESS

Name

 Last First Middle

Current Address

 Number Street apt

 City State Zip Code

Home Telephone Number

() _____
 Area Code Number

Work (or Message) Telephone Number

() _____
 Area Code Number

Driver's License Number

 State Number

Class

Vehicle Accidents within last five years Yes No

Vehicle Citations within last five years Yes No

Explain _____

Can you verify your legal right to work in the United States?

Yes No

"Have you been convicted of any crimes except minor marijuana convictions over two years old that are exempted under Labor Code 432.8?" Yes No

If yes, explain _____
 (A conviction will not necessarily disqualify you for the job)

Are you available for shift work if required by the position? Yes No

Are you willing to work overtime as required? Yes No

Have you worked for CVWD before? Yes No

Date _____ Position _____

Date available for work _____

List friends working for us: _____

List relatives working for us and what relation? _____

WORK HISTORY: Beginning with your most recent position account for all of your time for the past 10 years

1. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

2. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

3. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

4. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

5. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

6. Company	From		To		Immediate Supervisor
	Month	Year	Month	Year	
Job Title					Phone
Business Address (Street, City, Zip)					Earnings at Hire & Termination
Reason for leaving					
Description of Duties					

EDUCATION/SKILLS

	Name of School	City & State	Major or Type of Course	Circle Last Year Comp.	Degree
High School				9 10 11 12	
College or University				1 2 3 4	
Trade School / Additional Schooling _____					

List below any other experience you feel would be helpful in considering your application

OTHER

List below any other professional licenses, certifications or registrations (list states and registration numbers), training, professional organizations or experience.

BUSINESS MACHINES

Check the machines you can operate (indicate speed where requested)

Typewriter WPM_____ WordProcessor WPM_____ Multi line phones

Calculator Computer Shorthand WPM_____

List computer programs _____

CONSTRUCTION EQUIPMENT/MACHINES OPERATED

List below the types of construction equipment and machines you have used

OPERATOR CERTIFICATION**WASTEWATER/COLLECTION SYSTEMS****WATER**StateGrade / levelStateGrade / level

_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

All applicants please read the following and address any questions to the personnel representative before signing below.

I authorize Coachella Valley Water District to make such investigations and inquires of my employment or other related matters as may be necessary in arriving at an employment decision. I certify that the information given hereon is true. I understand that falsification of this record is cause for immediate dismissal. It is also understood that upon hire, I will be required to furnish additional information as requested by the District. I understand that employment is contingent on passing a drug screen examination. I understand that after an offer of employment I may be required to pass a mental and / or physical examination to determine my ability to perform the essential functions of the job.

I understand and agree that my employment is at-will and that I may terminate my job at any time for any reason. I also understand that the District may terminate my job at any time with or without notice and with or without cause. My at-will status may only be changed in a written document signed by the general manager.

Applicant signature

Date