

# KITTERY WATER DISTRICT

( An Equal Opportunity Employer )

## Application for Employment

### PERSONAL INFORMATION

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \* \_\_\_\_\_ Social Security # \_\_\_\_\_ Cell Phone \_\_\_\_\_

\* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 years old but less than 70 years of age.

\*\*Married: ( ) YES ( ) NO Children: ( ) YES ( ) NO Sex: ( ) Male ( ) Female

\*\* Not intended to discriminate – may be left blank

Citizen of the United States: ( ) YES ( ) NO

If no, are you lawfully authorized to work in the United States? \_\_\_\_\_

If you have a temporary work authorization give date of expiration \_\_\_\_\_

Do you have a valid Commercial Driver's License (CDL): \_\_\_\_\_ If yes what class: \_\_\_\_\_

Do you have a valid driver's license: \_\_\_\_\_ State: \_\_\_\_\_ License number : \_\_\_\_\_

Have you ever been convicted of a motor vehicle moving violation: ( ) YES ( ) NO

If yes when: \_\_\_\_\_ Explain violation: \_\_\_\_\_

Have you ever been involved in a motor vehicle accident: ( ) YES ( ) NO

If yes when: \_\_\_\_\_ Explain accident: \_\_\_\_\_

Have you ever been convicted of a felony: ( ) YES ( ) NO

If yes when: \_\_\_\_\_ In what state: \_\_\_\_\_

Describe the felony: \_\_\_\_\_

Do you have any backhoe experience? If Yes explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any experience installing water pipe / services? If Yes explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you have any construction experience or machinery operation experience you feel would benefit our company? If Yes explain \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

POSITION APPLYING FOR: \_\_\_\_\_

Are you employed now: \_\_\_\_\_ If yes may we contact your present employer: \_\_\_\_\_

Have you ever applied to this company before: \_\_\_\_\_ If so when: \_\_\_\_\_

<u>EDUCATION</u>	Name & Location of School	# Years Attended	Did You Graduate	DATE
Elementary School				
High School				
College				
Trade School				
Other				

Have you ever served in the U.S. military: \_\_\_\_\_ Branch \_\_\_\_\_ Dates \_\_\_\_\_

Type of Discharge: \_\_\_\_\_ Currently serving in National Guard or Reserves: \_\_\_\_\_

Subjects of Special Study or Other Relevant Experience: \_\_\_\_\_

\_\_\_\_\_

**EXPERIENCE**      *(List most recent employer first)*

**(1) Dates Employed:** From \_\_\_\_\_ to \_\_\_\_\_

**Name of Company:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone:** (    ) \_\_\_\_\_

**Position Held:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Duties Performed:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason for Termination:** \_\_\_\_\_  
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**(2) Dates Employed:** From \_\_\_\_\_ to \_\_\_\_\_

**Name of Company:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone:** (    ) \_\_\_\_\_

**Position Held:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Duties Performed:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason for Termination:** \_\_\_\_\_  
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**(3) Dates Employed:** From \_\_\_\_\_ to \_\_\_\_\_

**Name of Company:** \_\_\_\_\_ **Salary:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Telephone:** (    ) \_\_\_\_\_

**Position Held:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_

**Duties Performed:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason for Termination:** \_\_\_\_\_

**REFERENCES**

Please give the names of three (3) persons Not Related To You, whom you have known at least one (1) year.

<u>NAME</u>	<u>ADDRESS</u>	<u>TELEPHONE</u>	<u>HOW AQUAINTED</u>	<u>YEARS AQUAINTED</u>
	_____			
	_____			
	_____			

**PHYSICAL RECORD**

Do you have any physical limitations that preclude you from performing any work for which you are being considered: ( ) YES ( ) NO

If yes, please describe: \_\_\_\_\_

In case of an emergency, who should we contact:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ TELE.: \_\_\_\_\_

Relationship: \_\_\_\_\_

Will you consent to: A Drug Test ( ) YES ( ) NO A Physical Examination ( ) YES ( ) NO

*" I certify that the facts contained in this application are true and complete to the best of my knowledge. I understand that, if employed, falsified statements on this application shall be grounds for dismissal.*

*I authorize investigation of all statements contained herein and the references listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release all parties from all liability for any damage that may result from furnishing same to you. I also authorize that a background check be performed and released to the Kittery Water District Human Resource Department."*

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

( Please feel free to attach your resume)

(rev. 12-09)