

APPLICATION FOR EMPLOYMENT

Applicants are considered without regard to race, color, religion, sex, national origin, age, sexual orientation, marital or veteran status, the presence of a non-job related disability, or any other legally protected status.

Please complete in INK. PRINT clearly. Incomplete applications may be disqualified.

Position Applied for			Date of Application		
Name	<i>Last</i>	<i>First</i>	<i>Middle</i>	Home Phone ()	
Address	<i>Number</i>	<i>Street</i>	<i>Apt. or P.O. Box</i>		Cell Phone ()
	<i>City</i>	<i>State</i>	<i>Zip Code</i>		Business Phone ()
Social Security Number		Drivers License Number		Type or Class	Expiration

Are you available to work: Full Time Part Time Shift Work Temporary

Are you legally eligible for employment in the USA? Yes No

Proof of legal right to work in the USA will be required upon employment.

May we write or call about your qualifications: Your present employer? Yes No Past employer(s)? Yes No

Have you ever filed an application with us before? Yes No

If yes, give date and position: _____

Have you ever been employed with us before? Yes No

Have you ever been convicted of a crime(s), either felony or misdemeanor, regardless of whether the conviction(s) resulted in a sentence, suspended sentence, probation or other resolution following a plea of guilty or no contest, a verdict, or other finding of guilt? In responding to this question, do not include: arrests that did not lead to a conviction; convictions for marijuana-related offenses or for possession of drug paraphernalia more than two years old; or any participation in or referral to any pre-trial or post trial diversion program.

Yes No

If your response is "yes", please explain the circumstances of the conviction below. A response of "yes" will not result in your automatic disqualification from employment. _____

List any friends/relatives working at WESA: _____

SKILLS, EDUCATION, TRAINING DATA

Refer to Position Description for Minimum Qualifications

High School				
Name	Address	State	Received Diploma/GED <input type="checkbox"/> Yes <input type="checkbox"/> No	Highest Grade Completed:
College/University/Other Education (including vocational/technical)				
Name and Location of School	Units Completed	Major	Degree	
Job Related Certificate(s), Professional or Technical License(s) or Skill(s) (Please attach copies)				
1. _____				
2. _____				

Please indicate your source of referral to WESA (check one)

WESA Employee
 Newspaper Ad
 Job Line
 Internet
 Other

INSTRUCTIONS:**(No Resumes in lieu of application)**

- List present or most recent position first.
- Account for all time (including military service) for the last ten years.
- Include all paid and unpaid experience that qualifies you for this position, including that prior to the last ten years.
- If more space is needed, attach extra sheets.

Employer 1.	Dates Employed		Exact Title of Your Position
	From	To	
Type of Business or Organization			Name and Title of Immediate Supervisor
Address of Employer (include City and State)	Hourly Rate/Salary		Reason for Leaving
	Starting	Final	
Telephone Number ()			
Description of Duties:			
Employer 2.	Dates Employed		Exact Title of Your Position
	From	To	
Type of Business or Organization			Name and Title of Immediate Supervisor
Address of Employer (include City and State)	Hourly Rate/Salary		Reason for Leaving
	Starting	Final	
Telephone Number ()			
Description of Duties:			
Employer 3.	Dates Employed		Exact Title of Your Position
	From	To	
Type of Business or Organization			Name and Title of Immediate Supervisor
Address of Employer (include City and State)	Hourly Rate/Salary		Reason for Leaving
	Starting	Final	
Telephone Number ()			
Description of Duties:			
Employer 4.	Dates Employed		Exact Title of Your Position
	From	To	
Type of Business or Organization			Name and Title of Immediate Supervisor
Address of Employer (include City and State)	Hourly Rate/Salary		Reason for Leaving
	Starting	Final	
Telephone Number ()			
Description of Duties:			

Applicant's Certification and Agreement

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby discharge the person or entity to whom any request for information is presented from any and all manner of actions, claims, and demands whatsoever, known or unknown, which I ever had, now have, may have or claim to have against the person or entity to whom this request is presented, or its agents or employees, arising out of or by reason of complying with any request by WESA for information in connection with my Application for Employment.

I understand that if I am hired, the length of my employment is not guaranteed. Just as I will be free to voluntarily terminate my employment at any time, with or without cause, WESA will be free to terminate my employment at any time, with or without cause, during the probationary period. 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.

I understand that employment is contingent upon successful verification of U.S. citizenship and/or approved employment eligibility in the United States and upon successful completion of a pre-employment physical exam.

Applicant's Signature _____

Date _____

Applications Without Signatures Will Be DISQUALIFIED

The following information will be detached from your application and used for research and statistical purposes only.

PLEASE PRINT

YOUR NAME: (Last) (First) (M.I.)		SOCIAL SECURITY NO.:
JOB APPLIED FOR:		APPLICATION DATE: (MO.) (DAY) (YR.)
<p>In order to comply with Federal regulations in the area of Equal Opportunity Employment, employers must have data available on applicant flow patterns. For this reason, we would appreciate your voluntary cooperation in providing the following information. This information will be treated confidentially and will not be used to discriminate against any prospective or incumbent employee of the Water Employee Services Authority. This information may be provided to government officials investigating our contract compliance status.</p>		
SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female	AGE GROUP: <input type="checkbox"/> Under 40 <input type="checkbox"/> Over 40	VETERAN STATUS: <input type="checkbox"/> Disabled Veteran <input type="checkbox"/> Veteran of the Vietnam Era
<p>ETHNIC BACKGROUND: (See below for definition) Choose the one (ONLY ONE) ethnic group with which you most closely identify yourself.</p> <p><input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native</p> <p><input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> Hawaiian or Pacific Islander</p> <p><input type="checkbox"/> Other</p>		
<p>ETHNIC ORIGIN DEFINITIONS:</p> <p>White (includes European, Middle Eastern, or North African). Black (includes African, Jamaican, Trinadian, and West Indian). Hispanic (includes Mexican, Puerto Rican, Cuban, North And South American and Spanish). Hawaiian or Pacific Islander (includes Hawaiian, Guam, Samoan, or other Pacific Islanders). Asian (includes Far Eastern, Southeast Asian, or Indian, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, The Philippine Islands, Thailand, and Vietnam). American Indian or Alaskan Native (includes persons who identify themselves or are known as such by virtue of tribal association).</p> <p>(As prescribed by U.S.C. Title 29, Chapter XIV, Subpart 1, Section 1602.30)</p>		<p>AS A RESULT OF A DISABILITY, WILL YOU NEED TO HAVE ACCOMMODATION IN THE:</p> <p><input type="checkbox"/> Interview/exam process</p> <p><input type="checkbox"/> Performance of essential functions of the job</p> <p>If either box is checked, you will be contacted by a staff member who will assist in arranging reasonable accommodation.</p>