

Valley Water District

14515 Pioneer Way East, Puyallup, WA 98372

Telephone: 253-841-9698 / Fax: 253-770-8959

Email: service@valleywaterdistrict.com

APPLICATION FOR EMPLOYMENT

Valley Water District is an equal opportunity employer. Qualified applicants receive consideration for employment without discrimination because of race, color, national origin, creed, religion, sex, age, marital status, family relationship, or sensory, mental, or physical disability.

PLEASE READ CAREFULLY APPLICANT'S CERTIFICATION AND AGREEMENT

I authorize Valley Water District to verify all the information that I have provided on this application. I give my consent for all persons contacted by Valley Water District, including, but not limited to my former employers, to provide the requesting party with information regarding this application. I release each person from any and all liability of whatever kind or nature that may arise out of that person providing requested information regarding this application.

To the best of my knowledge, all the information herein is true and correct. I understand that any misrepresentation or omission of facts is cause for rejection of my application or possible termination of my employment.

I understand and agree that I may be tested as a part of the application process. I also understand and agree that test results may be used to help evaluate my suitability for employment. I give my permission for Valley Water District to perform a complete background check.

I understand that if I am employed by Valley Water District that my employment and compensation can be terminated, with or without cause, with or without notice, at any time, at the option of either the District or myself. I also understand that neither this application for employment nor any present or future employee handbook or personnel policy manual is an employment agreement, either expressed or implied.

I further understand that no representative of the employer other than the District Manager has any authority to enter into any agreement for employment for any specified period, or to make any agreement contrary to the foregoing, except that certain positions may be covered by a collective bargaining agreement which sets forth the terms of employment governing such positions.

SIGNATURE OF APPLICANT _____

PERSONAL INFORMATION

Last Name	First Name	Middle Name	Application Date
	Home Phone	Message Phone	Email Address
Permanent Address	City, State, Zip		
Mailing Address	City, State, Zip		

EMPLOYMENT DESIRED

Position Desired	Available for: (circle one) Full-time Part-time Temporary	Date Available for Work	Salary Desired
Are you now employed? Yes No	If so, may we inquire of your present employer? Yes No	Have you previously applied to the District? Yes No	If yes, when?
Names of Relatives Employed Here			

EDUCATION

High School	Location	When? (From/To)	Graduate Degree or Certificate?
Colleges	Location	When? (From/To)	Graduate Degree or Certificate?
Trade or Other Schools	Location	When? (From/To)	Graduate Degree or Certificate?
Are you in school now? Yes No	If yes, days and times?	Name of School	

GENERAL

Professional Licenses or Certifications (License Number, Granted by, Expiration Date)	
List other areas of study, training, skills, and/or experiences that you feel are pertinent.	
U.S. Military Service / Rank?	

FORMER EMPLOYERS

List below the last four employers, starting with the most recent.

1	From	To	Name of Employer Address of Employer Employer Phone	
	Position/Title		Duties & Responsibilities	Reason for Leaving
2	From	To	Name of Employer Address of Employer Employer Phone	
	Position/Title		Duties & Responsibilities	Reason for Leaving
3	From	To	Name of Employer Address of Employer Employer Phone	
	Position/Title		Duties & Responsibilities	Reason for Leaving
4	From	To	Name of Employer Address of Employer Employer Phone	
	Position/Title		Duties & Responsibilities	Reason for Leaving

REFERENCES

Name	Address & Phone Number	Business	Years Known
1.			
2.			
3.			

1. Are you legally entitled to work in the U.S. because proof will be required if hired?	YES	NO
2. What are your monthly starting salary expectations?		
3. Have you ever been employed by Valley Water District or previously applied for a position with the District? If Yes, when?	YES	NO
4. How did you learn about this opening?		
5. Do you smoke?	YES	NO

Thank you for completing this application form and for your interest in employment with Valley Water District. We would like to assure you that your opportunity for employment with us will be based only on your merit and on no other consideration.

Valley Water District HR Department Only		
Date Received:	By:	