



# San Benito County Water District

30 Mansfield Road • P.O. Box 899 • Hollister, CA 95024-0899  
 Phone: (831) 637-8218 • Fax: (831) 637-7267

## Application for Employment

Please print your completed form, or print a blank form and handwrite for submission

We are an Equal Opportunity Employer. We do not discriminate on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex, gender, gender identity, gender expression, age, sexual orientation, military and veteran status, or any other legally-protected status. We consider applicants for all positions without regard to protected status.

(PLEASE PRINT)

Last Name	First Name	Middle Name
Address	Number	Street
		City
		State
		Zip
Telephone Number(s)	Day	Evening
		Messages
Email Address		

Position(s) Applied For	Date of Application
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How did you hear about this employment opportunity?		
Friend	Walk-in	Advertisement: _____
Relative	Employment Agency	Employee: _____
Website: _____		School: _____

If you are under 18 years of age, can you provide required proof of eligibility to work? \_\_\_Yes \_\_\_No

Have you ever filed an application with us before? If yes, give date: \_\_\_\_\_ \_\_\_Yes \_\_\_No

Have you ever been employed with us before? \_\_\_Yes \_\_\_No

Are you currently employed? \_\_\_Yes \_\_\_No

Are you legally eligible for employment in this country? \_\_\_Yes \_\_\_No

On what date would you be available for work? \_\_\_\_\_

Are you currently available to work: \_\_\_Full Time \_\_\_Part Time \_\_\_Temporary

What is your desired salary for this position \$\_\_\_\_\_ per \_\_\_\_\_

Are you currently on "lay-off" status and subject to recall? \_\_\_Yes \_\_\_No

Will you work overtime if required? \_\_\_Yes \_\_\_No

Can you travel if a job requires it? \_\_\_Yes \_\_\_No

Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_

Are you able to perform the "essential functions" of the job for which you are applying (with or without reasonable accommodation)? Please see job description at [www.sbcwd.com](http://www.sbcwd.com) for a list of essential functions. \_\_\_Yes \_\_\_No



# Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities which relate to the job for which you are applying. You may exclude organizations which indicate race, color, religion, gender, national origin, mental or physical disability or other protected status.

**1.**

Employer		Dates Employed		May we contact your supervisor for reference? _____ Yes _____ No _____ Later in the application process  Supervisor Email: _____ _____  Supervisor Phone No: _____ _____
		From	To	
Telephone Number(s)				
Address				
Job Title (starting & ending title)	Supervisor			
What did you like most about your position?				
What did you like least about your position?				
Reason for Leaving				

**2.**

Employer		Dates Employed		May we contact your supervisor for reference? _____ Yes _____ No _____ Later in the application process  Supervisor Email: _____ _____  Supervisor Phone No: _____ _____
		From	To	
Telephone Number(s)				
Address				
Job Title (starting & ending title)	Supervisor			
What did you like most about your position?				
What did you like least about your position?				
Reason for Leaving				

## Employment Experience (continued)

3.

Employer		Dates Employed		May we contact your supervisor for reference? ___ Yes ___ No ___ Later in the application process  Supervisor Email: _____  Supervisor Phone No: _____
		From	To	
Telephone Number(s)				
Address				
Job Title (starting & ending title)	Supervisor			
What did you like most about your position?				
What did you like least about your position?				
Reason for Leaving				

4.

Employer		Dates Employed		May we contact your supervisor for reference? ___ Yes ___ No ___ Later in the application process  Supervisor Email: _____  Supervisor Phone No: _____
		From	To	
Telephone Number(s)				
Address				
Job Title (starting & ending title)	Supervisor			
What did you like most about your position?				
What did you like least about your position?				
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

Explain any gaps in your employment:

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Have you ever been fired or asked to resign from a job? \_\_\_ Yes \_\_\_ No If yes, please explain: \_\_\_\_\_

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## Special Skills and Qualifications

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Summarize special job-related skills and qualifications acquired from employment or other experience (i.e. computer skills, writing skills, special accomplishments):

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\_\_\_ Word Processing: \_\_\_\_\_ Years: \_\_\_\_\_ \_\_\_ Spreadsheet: \_\_\_\_\_ Years: \_\_\_\_\_

\_\_\_ Presentation: \_\_\_\_\_ Years: \_\_\_\_\_ \_\_\_ Email: \_\_\_\_\_ Years: \_\_\_\_\_

In your current or previous job, have you ever written instructions or directions to be followed by employees or customers?

Yes      No      Not Applicable      If yes, please explain: \_\_\_\_\_

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Is there any other job-related information you want us to know about you? \_\_\_\_\_

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## References

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Give contact information of three business references who are not related to you.

Name	Title	Relationship to You	Telephone	E-mail	# of Years Known

# **Applicant's Statement**

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I certify that answers given herein are true, complete and correct 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 understand and acknowledge that the policy of the San Benito County Water District is such that the existence of a criminal conviction will not necessarily disqualify my application for employment.

I understand that if offered employment, the offer may be contingent on passing a pre-employment alcohol and drug screen for positions where there is a special need, a pre-employment physical to the extent job-related and consistent with business necessity and Department of Justice background check. I voluntarily agree to submit to these procedures. I also understand that I will be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

This application for employment shall be considered active for a period of time not to exceed 60 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

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 San Benito County Water District.

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the San Benito County Water District, I am entitled to copies of any such records obtained, unless I mark the checked box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_