



South Huntington Water District

EMPLOYMENT APPLICATION

Full name:

Date:

Address:

Phone:

Email: _____

**Position applied
for:**

Referral Source (Walk-in, Job posting, etc.) _____

Type of Employment desired: Full-Time _____ Part-Time _____ Seasonal _____

If necessary, best time to call you is: _____ AM _____ PM

Have you applied here before?

Yes No

If yes, give date(s) and position: _____

Are you a citizen of the United States?

Yes No

If no, are you authorized to work in the U.S.?

Yes No

Have you ever been convicted of a felony?

Yes No

If yes,
explain?

Are you able to meet the attendance requirements of the position?

Yes No

Will you work overtime if required?

Yes No

Driver's License number required: _____ State: _____

Education

Please provide the following information:

| | | | |
|----------------|----------------|--|----------------|
| School | City and State | | |
| From: _____ | To: _____ | Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/> | Diploma: _____ |
| College: _____ | Address: _____ | | |
| From: _____ | To: _____ | Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/> | Degree: _____ |
| Other: _____ | Address: _____ | | |
| From: _____ | To: _____ | Did you graduate? Yes <input type="checkbox"/> No <input type="checkbox"/> | Degree: _____ |

Previous Employment

| | |
|--|--|
| Company: _____ | Phone: _____ |
| Address: _____ | Supervisor: _____ |
| Job title: _____ | From: _____ To: _____ |
| Responsibilities: _____ | |
| May we contact your previous supervisor for a reference? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Company: _____ | Phone: _____ |
| Address: _____ | Supervisor: _____ |
| Job title: _____ | From: _____ To: _____ |
| Responsibilities: _____ | |

May we contact your previous supervisor for a reference? Yes No

Company: _____ Phone: _____

Address: _____ Supervisor: _____

Job title: _____ From: _____ To: _____

Responsibilities: _____

May we contact your previous supervisor for a reference? Yes No

References

Please list three professional references.

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Full name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____ Email: _____

Skills and Qualifications

Summarize any special training skills, languages, licenses, computer skills and/or certificates that may assist you in performing in the position for which you are applying:

Military Service

Branch: _____ From: _____ To: _____

Rank at discharge: _____ Type of discharge: _____

If other than honorable, explain: _____

Disclaimer and signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____