**SOUTH CLEVELAND WATER SUPPLY CORPORATION**

**APPLICATION FOR EMPLOYMENT**

Please complete the company application in full. Please print all information requested, sign all Releases and Application. Resumes may be attached but NOT a substitute. Only applications that are complete, legible and signed will be considered.

Date:\_\_\_\_\_\_\_\_ Position Applying for:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Wage Desired:\_\_\_\_\_\_\_\_\_

Employment Desired: \_\_\_ Full Time \_\_\_\_ Part Time How soon are you available for Work?\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Last First Middle

Present Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Number Street City State Zip

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell or Msg Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Are you a United States Citizen: \_\_\_\_\_

 If not, what type of Visa do you have? \_\_\_\_\_ Expiration date:\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_ Place of Birth:\_\_\_\_\_\_\_\_\_ Social Security Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DO YOU HAVE A DRIVER’S LICENSE?\_\_\_\_\_\_\_\_\_ Driver’s License No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of Issue:\_\_\_\_\_\_\_\_\_\_\_ Expiration Date:\_\_\_\_\_\_\_\_\_

What is your means of transportation to work?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had a conviction for DWI in any State?\_\_\_\_\_\_\_\_\_

Have you ever had your license suspended? \_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a Crime? \_\_\_\_\_\_\_\_

If yes, explain conviction(s), nature of offense(s), State(s) where offenses occurred, and Sentence(s) imposed by the Court. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MILITARY**

Have you ever been in the Armed Forces? \_\_\_\_

Are you presently on active duty or a member of the National Guard? \_\_\_\_

Date entered: \_\_\_\_ Discharge Date: \_\_\_\_ Type discharge: \_\_\_\_\_\_ Specialty: \_\_\_\_\_\_\_

**EDUCATION**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| TYPE OF SCHOOL | NAME OF SCHOOL | LOCATION(complete mailing address) | NUMBER OF YEARS COMPLETED | MAJOR & DEGREE |
| HIGH SCHOOL |  |  |  |  |
|  |  |  |  |  |
| COLLEGE |  |  |  |  |
|  |  |  |  |  |
| BUSINESS OR TRADE SCHOOL |  |  |  |  |

**EQUIPMENT & MAINTENANCE EXPERIENCE**

Heavy Equipment you can operate:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years Experience:\_\_\_\_\_\_\_

Heavy Equipment Repair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years Experience:\_\_\_\_\_\_\_

Maintenance Experience:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Years Experience: \_\_\_\_\_\_\_

**TELL US ABOUT YOURSELF AND YOUR QUALIFICATIONS:**

An application form sometimes makes it difficult for an individual to adequately summarize their experience. Use this space below to summarize additional information describing your experience and full qualifications for the position for which you are applying. You may also include any explanations you feel would be helpful in understanding other issues in your application.

**WORK EXPERIENCE**

Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From \_\_/\_\_/\_\_\_\_ to \_\_/\_\_/\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pay or Salary \_\_\_\_\_\_\_\_\_\_\_\_\_

Your Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From \_\_/\_\_/\_\_\_\_ to \_\_/\_\_/\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pay or Salary \_\_\_\_\_\_\_\_\_\_\_\_\_

Your Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

Name of Employer:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ From \_\_/\_\_/\_\_\_\_ to \_\_/\_\_/\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Pay or Salary \_\_\_\_\_\_\_\_\_\_\_\_\_

Your Job Title:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reason for Leaving:\_\_\_\_\_\_\_\_\_\_\_

List the duties you performed, skills you used or learned, support or supervisory positions held and promotions.

**LIST ALL QUALIFICATONS YOU HAVE THAT WOULD BE IMPORTANT IN THE POSITION IN WHICH YOU ARE APPLYING FOR.**

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**AUTHORIZATION FOR BACKGROUND CHECK**

(Please read and sign this form in the space provided below. Your written authorization is necessary for completion of the application process.)

I, \_\_\_\_\_\_\_\_\_\_\_\_, hereby authorize South Cleveland Water Supply Corporation to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that South Cleveland Water Supply Corporation will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the company's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for employment will not be processed further.

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

Signature of Employee                             Date

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

Employee's Name - Printed