

**Auburn Water System, Inc.**  
**APPLICATION FOR EMPLOYMENT**

**Auburn Water System, Inc. is an equal opportunity employer and does not discriminate on the basis of any trait or class protected by federal, state, or local law.**

**PERSONAL INFORMATION**

*Incomplete or misleading information could disqualify you from further consideration. Please complete all fields.*

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

E-mail Address \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

SS# \_\_\_\_\_ Driver's License # \_\_\_\_\_

Are you legally eligible to work in the U.S? \_\_\_Yes \_\_\_No

Are you at least 18 years or older? (If no, you may be required to provide authorization to work.)  
\_\_\_Yes \_\_\_No

**EMPLOYMENT DESIRED**

Position desired \_\_\_\_\_

Date you can start \_\_\_\_\_ Hourly Rate/Salary desired \_\_\_\_\_

Are you currently employed? \_\_\_ If so, may we obtain a reference from your present employer?

\_\_\_\_\_

**AVAILABILITY:**

When will you be available to start work? \_\_\_\_\_

Can you work any shift? \_\_\_Yes \_\_\_No What specific hours are you available? \_\_\_\_\_

Can you work overtime, including weekends? \_\_\_Yes \_\_\_No

Based on what you currently know about the position, can you perform the essential functions of the position for which you are applying? Yes \_\_\_\_\_ No \_\_\_\_\_. If no, please explain. (If you should have any questions about the requirements for the position of which you are applying, please ask the interviewer before you answer this question.)

**REFERRAL SOURCE**

How did you hear about us? On-line Walk In Advertisement Referral  
Other

Have you ever worked for this company before?

\_\_\_Yes \_\_\_No Explain \_\_\_\_\_

Do you know anyone who works for our company? \_\_\_Yes \_\_\_No. If yes, who? \_\_\_\_\_

---

<b>EDUCATION</b>	<b>Name and location of school</b>	<b>Years Attended</b>	<b>Degree</b>	<b>Subjects/Major</b>
High School				
College or University				
Trade, Business or Correspondence School				

---

**EMPLOYMENT HISTORY:** Include at least your last seven (7) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time. *Incomplete or misleading information could disqualify you from further consideration.*

**Current and Former Employers:**

---

**1. Name and Address of Employer:**

---

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Job Title:**

---

**Immediate Supervisor and Title:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **or Email address:** \_\_\_\_\_

**Summarize the job responsibilities you were responsible for:**

---

**Reason For Leaving this position:** \_\_\_\_\_

**Hourly Rate or Salary Currently or at the time of departure:** \_\_\_\_\_

---

**2. Name and Address of Employer:**

---

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Job Title:**

---

**Immediate Supervisor and Title:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **or Email address:** \_\_\_\_\_

**Summarize the job responsibilities you were responsible for:**

---

---

**Reason For Leaving this position:** \_\_\_\_\_

**Hourly Rate or Salary Currently or at the time of departure:** \_\_\_\_\_

---

**3. Name and Address of Employer:**

---

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Job Title:**

---

**Immediate Supervisor and Title:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **or Email address:** \_\_\_\_\_

**Summarize the job responsibilities you were responsible for:**

---

---

**Reason For Leaving this position:** \_\_\_\_\_

**Hourly Rate or Salary Currently or at the time of departure:** \_\_\_\_\_

---

**4. Name and Address of Employer:**

---

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Job Title:**

---

**Immediate Supervisor and Title:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **or Email address:** \_\_\_\_\_

**Summarize the job responsibilities you were responsible for:**

---

---

**Reason For Leaving this position:** \_\_\_\_\_

**Hourly Rate or Salary Currently or at the time of departure:** \_\_\_\_\_

---

**5. Name and Address of Employer:**

---

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_

**Job Title:**

---

**Immediate Supervisor and Title:** \_\_\_\_\_

**Contact Number:** \_\_\_\_\_ **or Email address:** \_\_\_\_\_

**Summarize the nature of the work performed and your job responsibilities:**

---

---

**Reason For Leaving this position:** \_\_\_\_\_

**Hourly Rate or Salary Currently or at the time of departure:** \_\_\_\_\_

**Special Skills:** Do you have any special skills, experience that would enhance your ability to perform the position for which you are applying?

**References:** Give the names of three persons not related to you, whom you have known well at least the last 3 years.

Name	Address, Phone, Email	Company	Years Known
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

**Please read the following Statement and the Conditions of Employment carefully, before Signing this Application:**

Auburn Water Systems, Inc. does not discriminate on the basis of race, color, religion, creed, sex, sexual orientation, age, national origin or ancestry, physical or mental disability, veteran status, marital status, citizenship status, or military status, as well as any other category protected by federal, state, or local laws.

I understand that neither the completion of this application, nor any other part of my consideration for employment establishes any obligation for Auburn Water Systems, Inc, to hire me. If I am hired, I understand that either Auburn Water Systems, Inc., or I can terminate my employment at any time and for any reason, with or without cause and without prior notice. I understand that no representative of Auburn Water Systems, Inc. has the authority to make any assurance to the contrary.

I attest with my signature below that I have given to Auburn Water Systems, Inc., true and complete information on this application. No requested information has been concealed.

I authorize Auburn Water Systems, Inc., to contact references provided for employment reference checks, as well as any of the previous Supervisors listed in this application and authorize Auburn Water System to run any background and driver's license checks. If any information I have provided is untrue, or if I have concealed material information, I understand that this will constitute cause for the denial of employment or immediate dismissal.

## **CONDITIONS OF EMPLOYMENT**

I understand and acknowledge the following:

1. I understand that any offer of employment may be conditioned on passing a medical examination, including drug and/or alcohol testing, and that a positive test will result in rejection of this employment application and withdrawal of the conditional offer of employment.
2. I understand that any offer of employment may be conditioned on passing a background check and driver's license check, and that a failed background or driver's license check will result in rejection of the employment application and withdrawal of the conditional offer of employment.
3. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.
4. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when, how or in what context discovered to be false or omitted, may result in my immediate termination.
5. I understand that I will be required to possess a current and valid driver's license if my job requires me to drive in the course of my work and that I may also be subject to a motor vehicle check for insurance purposes.
6. I understand and agree that, if I am offered a position, it will be offered on condition that my employment shall be at-will and for no definite period of time. I understand and agree that the Company may terminate my employment at any time, with or without cause, and with or without notice, at my option or the option of the Company.
7. I understand that no supervisor or manager may alter or amend the conditions set forth above.

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

**This application will only be valid for 60 days from the date signed and dated above.**