

RAPIDES PARISH WATER WORKS DISTRICT NO. 3

EMPLOYMENT APPLICATION

This application will be considered active for only 60 days after its completion. If you wish to be considered for employment after that time, you must submit a new application. You must fill in your own application (please print). Remember, omissions or falsifications will result in ineligibility for employment or immediate dismissal if employed. INCOMPLETE APPLICATION FORMS WILL NOT BE CONSIDERED.

PERSONAL:

Date _____

Social Security Number: _____ - _____ - _____

Name _____
(Last) (First) (Middle)

Current Address _____ Phone No. _____

City _____ State _____ Zip Code _____

Previous Address _____ Phone No. _____

City _____ State _____ Zip Code _____

How long at current address? _____ How long at previous address? _____

Are you at least 18 years of age? Yes _____ No _____

Have you ever been convicted of a crime(s) other than a minor traffic violation?

Yes _____ No _____ Explanatory Details _____

Conviction is not an automatic disqualification. All relevant facts and circumstances will be considered.

GENERAL:

Position Desired _____ Current Position _____

Wage or Salary Desired _____ Date Available for Work _____

If you are currently employed, may we contact your employer? _____

Have you previously worked for our Company? Yes _____ No _____ If yes, when? _____

Have you previously applied for employment with our Company? Yes _____ No _____ If yes, when? _____

Why do you desire a change? _____

List any relatives employed by our Company _____

EDUCATION: (Circle the highest grade completed)

	Names of School	Location	Graduate	
			Yes	No
Grade School	1 2 3 4 5 6 7 8		Yes	No
High School	9 10 11 12		Yes	No
College	1 2 3 4		Yes	No
Graduate School	1 2 3 4		Yes	No
Trade School	1 2 3 4		Yes	No

List any academic, professional, trade, civic or social activities, offices held or other related accomplishments. (Exclude those, which may indicate race, color, religion, sex or national origin.)

EMPLOYMENT ELIGIBILITY STATUS:

Are you lawfully eligible to be employed in the United States? Yes ____ No ____.
(Proof of citizenship or immigration status is required upon employment.)

EMPLOYMENT HISTORY: List below all your previous employment. Account for all your time including periods of unemployment. (If you have been self-employed, please give details such as name of the firm, location a why business was discontinued.) Begin with your most recent job and work back.

Company _____ Type of Business _____
Address _____ Phone Number _____
Date Started _____ Date Left _____ Position _____
Supervisor's Name _____ Final Rate of Pay _____
Description of Duties _____
Reason for Leaving _____

Company _____ Type of Business _____
Address _____ Phone Number _____
Date Started _____ Date Left _____ Position _____
Supervisor's Name _____ Final Rate of Pay _____
Description of Duties _____
Reason for Leaving _____

Company _____ Type of Business _____
Address _____ Phone Number _____
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Supervisor's Name _____ Final Rate of Pay _____
Description of Duties _____
Reason for Leaving _____

Company _____ Type of Business _____
Address _____ Phone Number _____
Date Started _____ Date Left _____ Position _____
Supervisor's Name _____ Final Rate of Pay _____
Description of Duties _____
Reason for Leaving _____

Please explain any periods during which you were not employed (except for military service)

Have you ever been terminated or asked to resign from a job? Yes ____ No ____ . If yes, explain:

IF ADDIITONAL SPACE IS NEEDED TO ANSWER, PLEASE ATTACH ADDITIONAL SHEETS.

MILITARY SERVICE:

Branch _____ Date of Entry _____ Date of Discharge _____ Rank at Discharge _____

Describe your duties:

SKILLS

List and describe any special skills, experience, or aptitudes that you feel qualify you for a position with our Company. _____

REFERENCES:

List three business, professional, or other references who can attest to your work capabilities (do not include relatives or former employers).

Name	Address	Phone Number	Occupation
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NOTIFICATION:

In the event of an emergency, notify the following persons (not your spouse):

Name	Address	Phone Number	Relationship
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IF ADDITIONAL SPACE IS NEEDED TO ANSWER, PLEASE ATTACH ADDITIONAL SHEETS.

IMPORTANT: READ THIS CAREFULLY BEFORE SIGNING & DATING APPLICATION

NOTICE: An investigative consumer report involving information concerning your character, employment history, general reputation, police record, personal habits, mode of living, credit and indebtedness may be obtained prior to any offer of employment. Upon timely written request to the personnel department of the company, the name and address of the reporting agency will be disclosed to you.

I certify that the answers given by me on this application are true, correct and complete. I agree that any misstatement or pertinent omission made by me in the application may be the cause for my rejection, or if hired, may subsequently subject me to dismissal. Moreover, I understand that all offers of employment are conditioned upon passing the company's prescribed physical medical examination and drug test. I authorize any company, school, police or security personnel, or other person to give any information regarding my employment, habits, ability, or any other characteristics whatsoever, together with any information they may have regarding me whether or not it is in their records. I hereby release all persons from liability and agree to hold harmless any person(s) for such testing, or issuing this information.

If employed, I agree, as a condition of my continued employment, to submit to a blood test or urinalysis as requested and paid for by the company. I further agree to the search or examination of myself or personal property while on the company's premises or while conducting its business elsewhere. It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates the company to employ me.

In the event of employment, I will comply with all company rules and regulations as may be established from time to time. I am willing to work all assigned overtime or other special work assignments as requested by the company. Furthermore, since the company does not offer contracts of employment, I understand that nothing contained in this application form is intended to create a contract between the company and me for either employment or the provision of any compensation or benefits. I understand that, if employed, I have the right to terminate my employment at any time and likewise, the company has the same right.

_____, 20____

Signature of Applicant

WE ARE AN EQUAL OPPORTUNITY EMPLOYER. All qualified applicants are considered for employment without regard to race, color, sex, age (40 and over), religion or national origin, disability, veteran or other protected status.

EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION DATA

This Company is an Equal Opportunity/Affirmative Action Employer and as such, is required by law to maintain certain information regarding applicants interested in employment. You are invited to provide the following information voluntarily. This information will remain CONFIDENTIAL and will be used only for purposes allowed by law. Refusal to provide such information will not subject you to any adverse treatment nor will it become part of your personnel record should you become employed at this Company. Thank you for your cooperation.

POSITION APPLIED FOR	DATE

NAME (Last, First, Middle Initial)	GENDER
	<input type="checkbox"/> Male <input type="checkbox"/> Female

RACE/ETHNIC CATEGORY	
<input type="checkbox"/> White (not of Hispanic origin)	<input type="checkbox"/> American Indian or Alaskan Native
<input type="checkbox"/> Black (not of Hispanic origin)	<input type="checkbox"/> Hispanic
<input type="checkbox"/> Asian or Pacific Islander	

How did you find out about us?		
Please specify the name of the newspaper or agency, if applicable.		
<input type="checkbox"/> Employee Referral	<input type="checkbox"/> Newspaper Ad	<input type="checkbox"/> Internet Job Listing
<input type="checkbox"/> Job Service	<input type="checkbox"/> School	<input type="checkbox"/> Government Agency
<input type="checkbox"/> Job Fair	<input type="checkbox"/> Other	