

PERSONAL

Can you after employment, submit a birth certificate or other proof of identity and legal right to work in the United States? Yes No

Are you able to perform the essential functions of the job for which you are applying? Yes No

If no, please describe the functions that cannot be performed:

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Drivers License No: _____

EMPLOYMENT

List all jobs and activities including military service, schools, part-time employment while in school and self-employment for the past 10 years. Begin with the most recent.	
Employer:	
Address:	Telephone:
Position Title:	E-mail:
Supervisor Name and Title:	May we contact your present employer for references? Yes <input type="checkbox"/> No <input type="checkbox"/>
Dates of Employment (From/To):	Reason for Leaving:
Responsibilities:	
Employer:	
Address:	Telephone:
Position Title:	E-mail:
Supervisor Name and Title:	May we contact your present employer for references? Yes <input type="checkbox"/> No <input type="checkbox"/>
Dates of Employment (From/To):	Reason for Leaving:
Responsibilities:	

Employer:	
Address:	Telephone:
Position Title:	E-mail:
Supervisor Name and Title:	May we contact this former employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Dates of Employment (From/To):	Reason for Leaving:
Responsibilities:	
Employer:	
Address:	Telephone:
Position Title:	E-mail:
Supervisor Name and Title:	May we contact this former employer? Yes <input type="checkbox"/> No <input type="checkbox"/>
Dates of Employment (From/To):	Reason for Leaving:
Responsibilities:	

The facts set forth above in my application for employment are true and complete. I understand that, if employed, false statements on this application shall be considered sufficient cause for dismissal. My signature below authorizes Rincon Municipal Water District to conduct a background investigation and authorizes the release of information in connection with my application for employment. This investigation may include such information as criminal convictions, driving records, previous employers and references. I also understand that any offer of employment with the Rincon del Diablo Municipal Water District **is contingent upon passing a medical examination, which includes a drug screen** and the ability to present documents establishing the legal right to work in the United States.

Signature of Applicant

Date