## Idyllwild Water District

## Job Application

Name (Last Name First)				
Social Security Number				
Physical Address				
City				
Mailing Address				
City		_ State	Zip Code	
Home Phone				
Position	Date you can beş	gin	Salary desired	-
Are you currently employed? Ye	es No			
If so, may we inquire of your current emp	oloyer? Yes_	No		
Have you ever applied with IWD before?				
Name and Location of Schools Attended	d			
High School				
Years attended				
Subjects studied				
College				
Years attended				
Subjects studied				
Trade, business or correspondence scho	ools_			
Years attended				
Subjects studied				
Schools attended or associations where	water certificates wer	e received		
Schools/associations where wastewater	certificates were recei	ved.		

Special study/research or special training skills – List any water and/or sewer certificates and date received					
U.S. Military or Naval Service – List rank a	and type of discharge				
Former Employers (List last employer first	t)				
Name and address of employer					
Date: Mo/Yr.					
Position					
Reason for leaving					
Name and address of employer					
Date: Mo/Yr.					
Position					
Reason for leaving					
Date: Mo/Yr.					
Reason for leaving					
References (Names of three persons not re	elated to you whom you have known at least one year)				
Name					
Address					
Phone Number					
Name					
Address					
Phone Number	Years known				
Name					
Phone Number	Years known				

## Authorization

"I certify that the facts contained in this application are true and complete to the best of my knowledge and understand that, if employed, falsified statements on this application shall be grounds for dismissal.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise, and release the company from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the company has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing, unless it is in writing and signed by an authorized company representative."

Signature		Date_		
*************	**************************************	ITE BELOW THIS LI	VE**********	*****
Remarks				
			Salary:	
			,	
Interviewed by:	Date:			