DEERHORN COMMUNITY WATER ASSOCIATION Application for Employment

DCWA makes its employment decisions without regard to race, color, sex, national origin, religion, marital status, sexual orientation, age, prior industrial injury, mental or physical handicaps or any other protected classification unrelated to job performance. Smoking is not permitted on the job except during breaks and lunch periods. No smoking is allowed in DCWA buildings, vehicles, or near DCWA facilities or equipment. This application will be considered only for the specific job applied for. It will not be retained. If you desire to be considered for a position at a future time you must file a new application. Rainbow Water District contracts with DCWA to provide water system management that includes providing employee oversight and direction. Consent provided in this application applies to both Rainbow Water District and DCWA.

Position applied for V		Date			
(Last) Address	(Fir	st)	(Middle)	
Telephone	Aı	re you over 18 years of	age?		
Please describe any educa which you are applying (U			nink are releva	nt to the positio	n for
Name and Location	Course of Study		Credits	Degree	Year
Military experience or oth Training			_		
Did you graduate from hig If yes, name and location o				No	
List currently valid drivin certification number, statedate.	e and	·	C		
	I	Referred By			
Register Guard: O			State Employment Office		

Previous Work Experience

Please list the most recent employment first (Use additional pages if necessary).

Employer				Telephone No	. ()	
Address				_		
Immediate supervisor_				Length of em	ployment	To
Position held	·			_		
Did you supervise other Job responsibilities, equ	rs in this position? uipment operated	Yes (Use addit	s ional sh	No If yes, hov eets if necessar	v many? ry).	
						
						
D 6 1 · 1						
Reason for leaving or d	esiring to leave					· · · · · · · · · · · · · · · · · · ·
Employer				Telephone No	()	
Address				retephone 100	•	
Immediate supervisor Length of employment				plovment	To	
Position held						
Did you supervise other Job responsibilities, equ						
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Reason for leaving	4 1 0	X 7	N.T.	NT 4 411.		
May we contact curre	ent employer?	Yes	No _	Not at thi	s time.	
		Super	visor R	eferences		
List current or former su with your performance o		n relatives v	who have	e known you lo	nger than one year	and who are familiar
Name	Compa	ıny		Phone	Relationship	Years Known

Certification of Applicant

Please read carefully before signing. I understand that if I do not fully complete all questions, sign and date this Application for Employment, I will be rejected from consideration for employment. I hereby certify that the statements on this Application for Employment, and any attachments submitted by me are true without material omission to the best of my knowledge and agree to have any of the statements verified by the Deerhorn Community Water Association.

I realize that for DCWA and its personnel (including contracted Rainbow staff) to make a knowledgeable decision as to my being hired, they must check with previous employers and in the future may be asked to give references to other employers. I consent and authorize Rainbow and DCWA and applicable personnel:

- (1) to ask any or all of my former employers for information concerning me, whether favorable or unfavorable, knowing that a complete answer is important to my being hired, and
- (2) to give information regarding my employment by DCWA to other employers who may request it. I therefore release all parties and persons connected with any request for information from all claims, liability and damages for whatever reason arising out of furnishing this information.

I understand that if I am applying for a DOT regulated position or any position designated by Rainbow or DCWA as a safety sensitive position my employment offer is contingent upon passing a post offer physical and drug test. Passing a drug test is defined as a verified negative result. District will pay for the physical and drug test. If I am applying for a DOT regulated or safety sensitive position, then I freely and voluntarily agree to take a urine test to detect drugs as part of the pre-employment process. I understand that refusal to take this test, failure submit to a physical examination, or a positive test result will disqualify me from further consideration of employment.

I understand that if I am a final candidate for a position, I will be required to authorize a Consumer Report, consisting of a background check and for specific positions may also consist of a credit profile report. Rainbow or DCWA will pay for these reports. I will be required to sign a separate authorization before this screening takes place.

I understand my employment is contingent upon proof of identity and verification of eligibility for employment in the USA in accordance with the Immigration Reform and Control Act of 1986.

By signing below, I am affirming the statements I have made in this application, plus any additional written or oral information I have provided, such as in a resume or an interview, are true and that I have not omitted anything about myself which might be important to Rainbow or DCWA in deciding whether to hire me. I understand any false statement, misrepresentation or material omission is sufficient grounds for Rainbow or DCWA to reject this application, or to terminate my employment without further consideration.

If I am hired, I understand that I am free to resign at any time, and without prior notice. Likewise, DCWA reserves the right to terminate my employment at any time for any reason it deems sufficient, with or without notice, except as required by law or prohibited by a labor agreement or individual employment agreement signed by the board chair or superintendent. In addition, I understand that my right to resign and DCWA's right to terminate my employment cannot be changed, except as set forth in an applicable labor agreement or written individual employment agreement.

This Application for Employment will be active for the duration of the job posting for which I have applied. I understand that in order to be considered for any position other than the job posted, I must submit another fully completed, signed and dated application.					
I have read and fully understand the information stated above and seek employment under these conditions.					
Applicant Signature	Date				