

# OSCEOLA WATER WORKS EMPLOYMENT APPLICATION

PRINT/TYPE AND COMPLETE ALL BLANKS

Date of Application \_\_\_\_ / \_\_\_\_ / \_\_\_\_

The Osceola Water Works is an Equal Opportunity Employer. Aids and services are available upon request to individuals with disabilities.

## GENERAL INFORMATION

Position(s) Applied \_\_\_\_\_ Date Available to Start \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Full Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_

Street City State Zip Code  
 Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Social Security # \_\_\_\_\_ Type of Employment  Full-Time  Part-Time  Temporary  Seasonal

Have you been employed here previously?  Yes  No If yes, previous name(s) \_\_\_\_\_ Are you

legally able to work in the United States?  Yes  No

Are you able to meet the minimum legal age requirements for the job as listed in the job description?  Yes  No

Are you able to perform essential functions of the job, with/without accommodation according to the description?  Yes  No

## MILITARY SERVICE

Are you a military Veteran?  Yes  No If yes, dates of active duty: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ to \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Summarize military work performed, job responsibilities, and special skills

\_\_\_\_\_  
 \_\_\_\_\_

Veterans are entitled to preference over other applicants of "no greater qualifications" with regard to City positions.

## CONVICTION RECORD

Have you been convicted of a crime in the last seven years?  Yes  No If yes, please explain

Conviction does NOT automatically bar you from employment, depending on the nature of the job, length of time since convicted and incarceration, nature and seriousness of the offense, and related rehabilitation.

## EDUCATION

Provide the following information of your educational background.

NAME/LOCATION	YEARS COMPLETED	DIPLOMA/ DEGREE EARNED	MAJOR COURSE OF STUDY
HIGH SCHOOL OR GED			
COLLEGE			
OTHER			

## Additional Training and Qualifications:

Provide any additional information about training, licenses, and/or certifications that makes you a good candidate for this position.

\_\_\_\_\_

**EMPLOYMENT HISTORY**

Provide the following information for your past four employers, assignments, or volunteer activities starting with the most recent.

START DATE	END DATE	EMPLOYER	TELEPHONE ( )
JOB TITLE		ADDRESS	
JOB DUTIES/RESPONSIBILITIES		SUPERVISOR NAME/TITLE	
REASON FOR LEAVING		HOURLY RATE / SALARY START \$ PER FINAL \$ PER	
START DATE	END DATE	EMPLOYER	TELEPHONE ( )
JOB TITLE		ADDRESS	
JOB DUTIES/RESPONSIBILITIES		SUPERVISOR NAME/TITLE	
REASON FOR LEAVING		HOURLY RATE / SALARY START \$ PER FINAL \$ PER	
START DATE	END DATE	EMPLOYER	TELEPHONE ( )
JOB TITLE		ADDRESS	
JOB DUTIES/RESPONSIBILITIES		SUPERVISOR NAME/TITLE	
REASON FOR LEAVING		HOURLY RATE / SALARY START \$ PER FINAL \$ PER	
START DATE	END DATE	EMPLOYER	TELEPHONE ( )
JOB TITLE		ADDRESS	
JOB DUTIES/RESPONSIBILITIES		SUPERVISOR NAME/TITLE	
REASON FOR LEAVING		HOURLY RATE / SALARY START \$ PER FINAL \$ PER	

**Additional Skills:**

Provide any additional information about work abilities, experiences, or interests that makes you a good candidate for this position.

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**REFERENCES**

NAME	TELEPHONE	YEARS KNOWN
	( )	
	( )	
	( )	

**READ AND SIGN BELOW ACKNOWLEDGING FULL UNDERSTANDING AND AGREEMENT**

I understand that if I am employed, any misrepresentation or material omission made by me on this application will be sufficient cause for cancellation of this application or immediate discharge from the Osceola Water Works' service whenever it is discovered.

I give the Osceola Water Works the right to contact and obtain information from all references, employers, educational institutions, and to otherwise verify the accuracy of the information contained in this application. I hereby release from liability the Osceola Water Works and its representatives for seeking, gathering, and using such information and all other persons, corporations, or organizations for furnishing such information.

I understand it is the Osceola Water Works' policy not to refuse to hire a qualified individual with a disability because of that person's need for reasonable accommodation as required by the ADA.

I also understand that if I am hired, I will be required to provide proof of identity and legal work authorization.

I understand that post offer pre-employment drug and alcohol testing may be required, and that a positive test result will terminate any job offer.

If I am hired, I understand that I may resign at any time, with or without cause and without prior notice, and the Osceola Water Works reserves the same right to terminate my employment at any time, with or without cause and prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no representative of the Osceola Water Works' other than an authorized officer, has the authority to make any assurances to the contrary. I further understand that any such assurances must be in writing and signed by an authorized officer.

The Osceola Water Works does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by local, state, or federal law.

I authorize the Osceola Water Works to conduct a driving record check if driving will be required in my position with the Osceola Water Works and will complete a criminal check regarding my background and further authorize all governmental agencies, departments, bureaus or related entities to release any and all information regarding my driving record and criminal history, if any, and also agree to prepare and sign any other form necessary to complete a criminal background check. I understand that a conviction is not an automatic bar to employment, but that the Osceola Water Works will consider the seriousness and nature of the crime, the date of the conviction, and the extent of any rehabilitation.

I understand the Osceola Water Works has the option of conducting a credit check on me. If such a check will be performed, the Osceola Water Works will provide me with written notice to comply with the Fair Credit Reporting Act. I agree to execute the appropriate authorization if presented to me by the Osceola Water Works.

This application is current for only 60 days. At the conclusion of this time if I have not heard from the Osceola Water Works and still wish to be considered for employment, it may be necessary to fill out a new application.

I represent and warrant that I have read and fully understand the foregoing, and seek employment under these conditions.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

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**OFFICE USE ONLY**

Date Received \_\_\_\_\_ Received By \_\_\_\_\_

Hire Date \_\_\_\_\_ Position Appointed \_\_\_\_\_

Signature of Supervisor \_\_\_\_\_ Date \_\_\_\_\_