



CENTRAL UTAH WATER CONSERVANCY DISTRICT
EMPLOYMENT APPLICATION

HUMAN RESOURCES
355 WEST UNIVERSITY PARKWAY
OREM, UT 84058-7303
PHONE (801) 226-7100 - FAX (801) 226-7107
Web Site: www.cuwcd.com

INSTRUCTIONS: Please print or type. The application must be filled out accurately and completely. Answer all questions. Applications containing unrequested information will not be considered. Do not leave an item blank. If an item does not apply, write N/A (not applicable). If you need additional space to answer a question fully, you may attach full sheets of paper that are the same size as this page. On each additional page, be sure to include your name and the position title. You may also attach copies of documents or certificates which support your application. All statements made on the application are subject to verification. Incomplete applications or applications with omissions or exaggerated, false or misleading statements may result in rejection of the application and/or dismissal from employment.

Position Applied For Date of Application
How Did You Learn About Us?
Advertisement Friend Other
Employment Agency Relative

Last Name First Name Middle Name
Address (Number) (Street) (City) (State) (Zip Code)
Telephone Number (s)
Home: Work:

ADDITIONAL INFORMATION

Can you provide documentation of your age if it is less than 18?
Have you ever filed an application with us before?
Have you ever been employed with us before?
Are you currently employed?
May we contact your present employer?
Can you provide documentation of your eligibility to work in this country?
On what date would you be available for work?
Are you available to work:
Do you have any commitments or agreements with another employer that might affect your employment with the Central Utah Water Conservancy District?
Can you travel if a job requires it?
Have you been convicted of a felony within the last 7 years?
If Yes, please explain

AN EQUAL OPPORTUNITY EMPLOYER

Central Utah Water Conservancy District does not discriminate unlawfully against employees or applicants for employment based on race, color, religion, national origin, gender, age, veteran's or current military status, disability or citizenship status.

## EMPLOYMENT EXPERIENCE

List your current or most recent job first. If you need additional space, please continue on a separate sheet of paper. **Complete this section even if resume is attached.**

Employer	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	Dates Employed		Work Performed
			From	To	
Address					
Telephone Number(s)			Hourly Rate/Salary		
			Starting	Final	
Job Title	Supervisor				
Reason for Leaving					
May we contact this employer?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If No, please explain _____
Employer	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	Dates Employed		Work Performed
			From	To	
Address					
Telephone Number(s)			Hourly Rate/Salary		
			Starting	Final	
Job Title	Supervisor				
Reason for Leaving					
May we contact this employer?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If No, please explain _____
Employer	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	Dates Employed		Work Performed
			From	To	
Address					
Telephone Number(s)			Hourly Rate/Salary		
			Starting	Final	
Job Title	Supervisor				
Reason for Leaving					
May we contact this employer?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If No, please explain _____
Employer	<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	Dates Employed		Work Performed
			From	To	
Address					
Telephone Number(s)			Hourly Rate/Salary		
			Starting	Final	
Job Title	Supervisor				
Reason For Leaving					
May we contact this employer?			<input type="checkbox"/> Yes <input type="checkbox"/> No		If No, please explain _____

Have you been dismissed or asked to resign from any position?

Yes  No

If yes, explain: \_\_\_\_\_

List professional, trade, business licenses or certificates, and civic offices held.  
 Exclude membership which would reveal gender, race, religion, national origin, age, disability or other protected status.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION**

HIGH SCHOOL AND COLLEGE/UNIVERSITY	EDUCATIONAL FIELD	DEGREE	# YEARS ATTENDED	HOURS LEFT TO EARN DEGREE	OVERALL CUM GPA (A=4.0)
HIGH SCHOOL	Circle highest year completed 1 2 3 4				
CITY & STATE					
COLLEGE	Major				
CITY & STATE	Minor				
COLLEGE	Major				
CITY & STATE	Minor				
COLLEGE	Major				
CITY & STATE	Minor				

DID YOU GRADUATE FROM COLLEGE?  YES  NO

**\*If the position you are applying for requires a degree, please attach a copy of your transcript(s).**

**COMPUTER SKILLS**

Please circle skill level for those that apply: (1=LOW - 5=HIGH)	Please list other computer skills and proficiency.
1 2 3 4 5 Microsoft Word	1 2 3 4 5 WordPerfect
1 2 3 4 5 Microsoft Excel	1 2 3 4 5 Quattro Pro
1 2 3 4 5 Microsoft Access	1 2 3 4 5 Windows
1 2 3 4 5 _____	1 2 3 4 5 AutoCAD
1 2 3 4 5 _____	

**SPECIALIZED SKILLS**

Check skills/equipment operated	List heavy equipment operated	List other skills
_____ Fax	_____	_____
_____ Copier	_____	_____
_____ Multi-line Telephone System	_____	_____
_____ Typing Speed (WPM)	_____	_____
_____ Shorthand	_____	_____
_____ Surveying	_____	_____
_____ Welding	_____	_____
_____ Instrumentation Reading	_____	_____

## REFERENCES

List persons, except supervisors, who can provide information about your <u>work</u> .				Years Known
Name	His/Her Position	Relationship to You	Area Code-Phone Number	
Organization		City	State	
Name	His/Her Position	Relationship to You	Area Code-Phone Number	
Organization		City	State	
Name	His/Her Position	Relationship to You	Area Code-Phone Number	
Organization		City	State	

## APPLICANT'S STATEMENT (Please Read the Following Carefully)

I certify that information given herein is true and complete to the best of my knowledge. I authorize CUWCD conduct a criminal background check and to contact my former employers, schools, etc., to obtain information regarding me. I hereby release them from any liability and hold them harmless from any claim for releasing any truthful information within their knowledge and/or records to CUWCD.

I authorize the District to release to any person, firm, entity or organization with whom I may seek employment in the future, any truthful information concerning my work experience with the District. I hereby release and hold the District harmless from any claim for releasing any truthful information within its knowledge and/or records.

I understand that CUWCD is a drug free workplace and requires a post-offer test for the use of drugs. I give my voluntary consent to be tested for the use of drugs. I understand that any job offer that may be extended to me will be contingent upon successful completion of a drug test.

I understand that CUWCD is an "at-will" employer and that my employment relationship can be terminated with or without cause, at any time, at the option of either the District or myself.

This application is current only for thirty (30) days, at the conclusion of which time, if you have not heard from us and still wish to be considered for employment, it will be necessary for you to fill out a new application.

I understand that falsification or omission in any detail may result in disqualification from further consideration or dismissal from employment at the time or after CUWCD discovers the omission or falsification.

**I have had the opportunity to have my questions about this statement's content and intent answered and understand its terms.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date