APPLICATION FOR EMPLOYMENT

THE GLADEVILLE UTILITY DISTRICT IS AN EQUAL OPPORTUNITY EMPLOYER

PERSONAL INFORMATION

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NAME (LAST NAME FIRST)					
CURRENT ADDRESS	CITY	STATE	ZIP CODE		
PERMANENT ADDRESS	CITY	STATE	ZIP CODE		
PHONE NUMBER	REFERRED BY				

EMPLOYMENT DESIRED

POSITION	DATE YOU COULD BEGIN WORK	SALARY EXPECTATION
ARE YOU EMPLOYED?	IF SO, MAY WE CONTACT YOUR PRES	ENT AND FORMER EMPLOYERS?
YES NO	YESNO	
HAVE YOU EVER APPLIED FOR EMPLOYMENT WITH THE DISTRICT BEFORE	IF SO, WHEN?	
YES NO		

EDUCATION HISTORY

NAME AND LOCA	TION OF SCHOOL	YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMER SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

GENERAL INFORMATION

SUBJECTS OF SPECIAL STUDY, WORK TRAINING OR SPECIAL SKILLS	TRAINING
U.S. MILITARY SERVICE (BRANCH & DATES OF SERVICE)	RANK

GENERAL INFORMATION

DATE (MONTH & YEAR)	NAME & ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
FROM				
ТО				
FROM				
ТО				
FROM				
то				
FROM				
то				

REFERENCES LIST BELOW THE NAMES OF THREE PERSONS, NOT RELATED TO YOU, THAT YOU HAVE KNOWN AT LEAST ONE YEAR.

NAME	ADDRESS	BUSINESS	YEARS KNOWN

AUTHORIZATION

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

I authorize the 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 hereby release the references and employers listed above from all liability for any damage that may result from utilization of such information.

I also understand and agree that no representative of the Gladeville Utility District 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 representative of the Gladeville Utility District, subject to the approval of the District's Board of Commissioners..

DATE:	SIGNATURE:		
INTERVIEWED BY:		DATE:	

DO NOT WRITE BELOW THIS LINE

Remarks	

NEATNESS			CHARACTER	ł	
PERSONALITY			CAPABILITIE	S OR SPECIAL SKILLS	
HIRED	FOR DEPARTMENT	POSITION		WILL REPORT ON	SALARY OR WAGES

APPROVED: 1.		2.		3.	
	GENERAL MANAGER	A	ASSISTANT MANAGER		BOARD OF COMMISSIONERS

THIS APPLICATION HAS BEEN PREPARED FOR USE BY THE GLADEVILLE UTILITY DISTRICT. IF ANY PORTION OF THE FORM IS FOUND TO VIOLATE ANY LOCAL, STATE OR FEDERAL LAWS, SUCH VIOLATION IS NOT INTENTIONAL AND THE REMAINING PARTS OF THE FORM SHALL STILL BE APPLICABLE IS ALL RESPECTS.