



1331 Concord Avenue
 P.O. Box H20
 Concord, CA 94524
 (925) 688-8000 - Fax: (925) 688-8345

EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

POSITION APPLYING FOR:

 (Enter exact title)

PLEASE TYPE OR PRINT IN INK.....INCOMPLETE OR ILLEGIBLE APPLICATIONS MAY NOT BE ACCEPTED.

1. APPLICANT'S NAME:

 (Last) (First) (Middle)

2. OTHER NAMES UNDER WHICH YOU MAY HAVE WORKED:

3. ADDRESS:

 (Number) (Street) (Apt. No.) (City) (State) (Zip)

4. TELEPHONE NUMBERS:

 (Home) (Work) (Message) (Cellular)

5. Are you a U. S. Citizen or do you have legal permission to work in the USA from the INS? If employed you will be required to submit proof of permission to work pursuant to Federal law. Yes No

6. Have you ever been convicted as an adult for any violation of the law? If yes, please provide dates, locations, and penalties. Please exclude traffic violations under \$100. Please also exclude convictions related to marijuana that are over two years old. A criminal background is not necessarily a bar to employment. Each case is given individual consideration based upon job relatedness. Failure to list all convictions may disqualify you from further consideration. Yes No

7. Do you have any physical or mental condition which would inhibit you from participating in planned testing for this position? If so, please indicate in the space below what accommodation you feel is necessary to assist you. Yes No

8. Have you ever been discharged or forced to resign or rejected during a probationary period from any employment within the last 10 years? If yes, give name of employer, dates of employment, and reasons below. A yes answer is not necessarily a bar to employment. Each case is given individual consideration based upon job relatedness. Yes No

9. List any licenses, certificates, or registrations required for this job (e.g., driver's license, treatment plant operator certification, California certificate of registration as a Professional Engineer).

Title	Date Issued	Expiration Date	Number
_____	_____	_____	_____
_____	_____	_____	_____

10. If applicable to the position you are seeking, indicate other special skills you possess (e.g., typing or shorthand speed, operation of office machines, computers and computer software, hand or power tools, or heavy equipment).

SURVEY: Where did you first hear about this position? newspaper job hotline web site friend or relative who works at CCWD

direct mailing (specify) _____

Anti-Nepotism Policy - It is the Districts policy to not employ or allow immediate family members, domestic partners, or persons involved in a romantic relationship to work in the same department or division, or in any assignment at the District unless the District first determines that the employment/ assignment of such individual does not result in interests that are incompatible, or potentially incompatible, with those of the District, such as the District's requirement to maintain appropriate management overview, supervision, safety, security and/or morale. Please list below any person(s) working at CCWD to whom you are related or in a relationship:

11. EDUCATION AND TRAINING: Circle Highest Grade Completed: 8 9 10 11 12 G.E.D. College: 1 2 3 4 Grad Work: Yes No

Educational Institutions	Dates Attended		Course of Study / Major	Diploma or Degree Awarded?		Units Completed		Type Degree	Date Req. Completed
	From	To		Yes <input type="checkbox"/>	No <input type="checkbox"/>	Semester	Quarter		
a) High School				Yes <input type="checkbox"/>	No <input type="checkbox"/>				
b) College University				Yes <input type="checkbox"/>	No <input type="checkbox"/>				
c)				Yes <input type="checkbox"/>	No <input type="checkbox"/>				
d)				Yes <input type="checkbox"/>	No <input type="checkbox"/>				
e) Other school/training completed				Hours Completed			Certificate Awarded		

12. WORK EXPERIENCE: The following section must be filled out completely. Begin with your present or most recent position and account for all experience within the past 10 years, whether related to the position you are applying for or not. Voluntary non-paid experience will be accepted if job-related. Use additional sheets, if necessary. You may submit a resume or other supporting documentation if you wish, but that does not substitute for completion of this section. **Do not write "see resume" only in "describe your duties" box.**

A) FROM Month / Year	TO: Month / Year	TOTAL: ___ Yrs / ___ Months	Exact title of position:		
Name and address of employer: _____ _____			Describe your duties: _____ _____		
Name and title of Supervisor: _____			Supervisor's Phone Number: _____		
Reason for Leaving:			Number of people supervised:	Hrs/week:	Final Salary: /mo or hr

B) FROM Month / Year	TO: Month / Year	TOTAL: ___ Yrs / ___ Months	Exact title of position:		
Name and address of employer: _____ _____			Describe your duties: _____ _____		
Name and title of Supervisor: _____			Supervisor's Phone Number: _____		
Reason for Leaving:			Number of people supervised:	Hrs/week:	Final Salary: /mo or hr

C) FROM Month / Year	TO: Month / Year	TOTAL: ___ Yrs / ___ Months	Exact title of position:		
Name and address of employer: _____ _____			Describe your duties: _____ _____		
Name and title of Supervisor: _____			Supervisor's Phone Number: _____		
Reason for Leaving:			Number of people supervised:	Hrs/week:	Final Salary: /mo or hr

D) FROM Month / Year	TO: Month / Year	TOTAL: ___ Yrs / ___ Months	Exact title of position:		
Name and address of employer: _____ _____			Describe your duties: _____ _____		
Name and title of Supervisor: _____			Supervisor's Phone Number: _____		

Reason for Leaving:	Number of people supervised:	Hrs/week:	Final Salary: /mo or hr
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13. CERTIFICATIONS:

1. I hereby certify that all statements made in this application are true, complete, and correct to the best of my knowledge and belief, and that any misstatements, omissions, or falsification of material facts will be considered cause for termination of my employment with the Contra Costa Water District.
2. I understand that employment is contingent upon successful completion of a job-related physical examination (which includes drug and alcohol screening), and criminal background investigation.
3. I authorize the release of any information necessary to verify the statements made in this application to the Contra Costa Water District or its duly authorized employees or agents. The District policy is that we will not contact your present employer unless a job offer is being seriously considered.
4. I understand that employment is contingent upon my providing verification of my identify and legal right to work in the U. S. pursuant to Federal law and upon signing a loyalty oath, pursuant to State law.

(Signature)

(Date)

Thank you for your interest in employment with the Contra Costa Water District