

#### **HUMBOLDT BAY MUNICIPAL WATER DISTRICT**

828 SEVENTH STREET • EUREKA, CALIFORNIA 95501 OFFICE 707-443-5018 ESSEX 707-822-2918 FAX 707-443-5731 707-822-8245

EMAIL OFFICE@HBMWD.COM

### **Employment Application**

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related mental or physical disability, or any other legally protected status.

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Position(s) Applied For	(F)	LEASE FRINT)	Date of Application	on	
r comon(c) / tppnca r cr			Date of Application	011	
How did you learn about us?					
Advertisement		Friend Walk-In	□Webs	sito	
			□ webs	SIL <del>C</del>	
☐ Employment Agency	☐ Relative ☐	Other			
Last Name	First Name	Middl	e Name		
Address Number	Street	City	State	9	Zip
Telephone Number(s)	Day	Evening	Messages		
If you are under 18 years of	age, can you provide	e required proof of your eligib	oility to work?	☐ Yes	∐ No
Have you ever filed an appli	cation with us before	e?		Yes	□No
			es, give date	☐ 1C3	
	1 11 1 6 0	,			
Have you ever been employ	'ed with us before?	.,		☐ Yes	∐ No
		If y	es, give date		
Are you currently employed	?			Yes	□No
May we contact your proces	ot amplayar?				
May we contact your preser	it employer?			∐ Yes	∐ No
Are you a CalPERS Member	r?			Yes	□No
-	fully becoming emplo	oyed in this country because	of Visa or	Yes	☐ No
Immigration Status?	pigration atotus will be res	vuirad unan amplaumant			
Proof of citizenship or imm		quirea upon empioyment.			
On what date would you be	available for work?		_		
Are you currently available t	o work: 🔲 Full Tii	me 🗌 Part Time 🔲 Ter	mporary		
Are you currently on "lay-off	" status and subject	to recall?		Yes	□No
Can you travel if a job requi	res it?			Yes	□No
can you have in a job roqui				∟ res	∟ ио

- WE ARE AN EQUAL OPPORTUNITY EMPLOYER -

# **Education**

	High School			Undergraduate College/University*			Graduate/ Professional*					
School Name, Location and Phone Number												
Years Completed	9	10	11	12	1	2	3	4	1	2	3	4
Describe Course of Study												
Describe any specialized training, apprenticeship, skills and extra curricular activities												
Describe any honors you have received												
State any additional information you feel may be helpful to us in considering your application												

<sup>\*</sup>Education beyond the requirements on the job description or not related to the job for which you are applying need not be listed.

 rround rovour dox, rado	, rengion, national on	ini, age, ancestry, or nar	ndicap or other protected sta	us.

# **Employment Experience**

Employer

Start with your present or last job. Include military service assignments and volunteer activities which relate to the job for which you are applying. You may exclude organizations which indicate race, color, religion, gender, national origin, mental or physical disability or other protected status.

Dates Employed

**Work Performed** 

		From	То	
Address				
Telephone Number(s)			I	
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving	I			
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)			I	
Job Title	Supervisor			
Reason for Leaving	I			
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)			<u> </u>	
Job Title	Supervisor			
Reason for Leaving				
	f you need additional space,	please continue on	a separate she	et of paper.
		•	•	
al Skills and Qu	<u>alifications</u>		, ,	
arize special job-re	elated skills and qualifica	ations acquired	from employr	ment or other experience.

### References

Give name, address and telephone number of three business references who are not related to you. **Telephone Address** Number Name 1. 2. 3. ☐ Yes ☐ No Do you have the physical and mental ability to perform the tasks on the attached job description, with or without accommodation? (If accommodation is necessary, please describe below)

## **Applicant's Statement**

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand and acknowledge that the policy of the Humboldt Bay Municipal Water District is such that the existence of a criminal conviction will not necessarily disqualify my application for employment.

I understand that if offered employment, the offer may be contingent on passing a preemployment alcohol and drug screen and a pre-employment physical and voluntarily agree to submit to these procedures. I also understand that I will be required to submit proof of my identity and legal right to work in the United States on my first day of employment.

If the position applied for requires driving in the course of work, I understand that I will be required to possess a current and valid California driver's license and understand that I will be required to provide a copy of my official driving record and proof of insurance.

This application for employment shall be considered active for a period of time not to exceed 45 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I understand and hereby acknowledge that any employment relationship with Humboldt Bay Municipal Water District is of an "at will" nature, which means that the employee may resign at any time and the Humboldt Bay Municipal Water District may discharge the employee at any time with or without cause. I also understand that this "at will" employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of the Humboldt Bay Municipal Water District.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Humboldt Bay Municipal Water District.

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Humboldt Bay Municipal Water District, I am entitled to copies of any such records obtained, unless I mark the checked box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

☐ I waive receipt of a copy of any public record described in the paragraph above.							
Signature of Applicant:	Date:						
NOTES:							