

# ICARD TOWNSHIP WATER CORPORATION

## APPLICATION FOR EMPLOYMENT

*It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, disability or other protected classification's.*

Please carefully read and answer all questions. You will not be considered for employment if you fail to completely answer all the questions on this application. You may attach a resume, but all questions must be answered.

Employer: Icard Township Water Corporation		Position applying for:	
<b>PERSONAL DATA</b>			
Name (last, first, middle)			
Street Address and/or Mailing Address			
Home Telephone Number	Business Telephone Number	Cellular Telephone Number	
Date you can start work	Salary Desired	Do you have a High School Diploma or GED? Yes <input type="checkbox"/> No <input type="checkbox"/>	
<b>POSITION INFORMATION</b> Check all that you are willing to work			
Hours:	Full Time <input type="checkbox"/>	Days <input type="checkbox"/>	Weekends <input type="checkbox"/>
	Part Time <input type="checkbox"/>	Evenings <input type="checkbox"/>	Night Shift <input type="checkbox"/>
Are you authorized to work in the U.S. on an unrestricted basis?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
Have you ever been convicted of a felony? (Convictions will not necessarily disqualify an applicant for employment.) Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, explain:			
<b>QUALIFICATIONS</b> Please list any education or training you feel relates to the position applied for that would help you perform the work, such as schools, colleges, degrees, vocational or technical programs, and military training.			
	School Name & Address (City/State)	Degree	Graduation/Completion Date
School			
School			
School			
<b>SPECIAL SKILLS</b> List any special skills or experience that you feel would help you in the position that you are applying for.			

**REFERENCES** Please list three professional references not related to you, with full name, address, phone number, and relationship. If you don't have three professional references, then list personal, unrelated references.

Name

Address/City/State

Phone

Relationship

Name

Address/City/State

Phone

Relationship

Name

Address/City/State

Phone

Relationship

**WORK HISTORY** Start with your present or most recent employment and work back. Use separate sheet if necessary.

<b>Job Title # 1</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving		
Starting Salary	Ending Salary	
<b>Job Title # 2</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving		
Starting Salary	Ending Salary	

<b>Job Title # 3</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving		
Starting Salary	Ending Salary	
<b>Job Title # 4</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving		
Starting Salary	Ending Salary	
<b>Job Title # 5</b>	Start Date (mo/day/yr)	End Date (mo/day/yr)
Company Name	Supervisor's Name	Phone Number
City	State	Zip
Duties:		
Reason for Leaving		
Starting Salary	Ending Salary	

I certify that the facts set forth in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions, or misrepresentations may result in my dismissal. I authorize the Employer to make an investigation of any of the facts set forth in this application and release the Employer from any liability. The employer may contact any listed references on this application.

I acknowledge and understand that the company is an "at will" employer. Therefore, any employees (regular, temporary, or other type of category employee) may resign at any time, just as the employer may terminate the employment relationship with any employees at any time, with or without cause, with or without notice to the other party.

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Applicant Signature

Date