

# EMPLOYMENT APPLICATION



**Westlands Water District**  
An Equal Opportunity/Affirmative Action Employer

3130 N. Fresno Street, P. O. Box 6056, Fresno, CA 93703  
Telephone (559) 241-6206 FAX (559) 241-6286

Human Resources Use Only		
Date Received:		
Ed. <input type="checkbox"/>	Exp. <input type="checkbox"/>	Lic. or <input type="checkbox"/>
Eqv. <input type="checkbox"/>	Eqv. <input type="checkbox"/>	Cert <input type="checkbox"/>
MQ's: <input type="checkbox"/> Yes <input type="checkbox"/> No By:		
Comments:		

Please type or print in ink all required information. Incomplete, illegible or unsigned applications may be eliminated from consideration.

Position Applying for: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Number and Street Apt. No.  
City State Zip  
Work /Message Phone: \_\_\_\_\_

## GENERAL INFORMATION:

<p>Would you accept temporary employment? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Are you now or have you ever been employed by the District? If yes, list date(s) and position(s). Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Are you related by blood or marriage to any person(s) presently employed by the District? If yes, list name(s) and relationship(s). Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Have you ever been discharged from employment or been forced to resign? If yes, give details. Attach a separate sheet if necessary. Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Having read the job announcement which lists examples of job duties for the position, are you able to perform these duties with or without accommodation? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If hired, can you provide proof of the legal right to work in the United States? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>If hired, can you provide proof of possession of a valid California Drivers License? If yes, give license number. Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Have you ever worked, attended school, or been known by another name? If yes, list name(s) and date(s) used. Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Have you ever been convicted of a felony? If yes, list offense, date, location and penalty. A conviction is not an automatic bar to employment. Yes <input type="checkbox"/> No <input type="checkbox"/></p>
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## EDUCATION AND TRAINING:

	School Name and Address	Major	Units Completed	Degree/Graduate
High School				
College				
Other (specify)				

License \* Certificate \* Registration \_\_\_\_\_ Granting Agency \_\_\_\_\_ Date Granted \_\_\_\_\_ Expiration \_\_\_\_\_

**EMPLOYMENT HISTORY:** Starting with your most recent employer, list all jobs and activities including military service, part-time employment and self-employment for the past 10 years. Additional prior experience related to the position for which you are applying may also be listed. Attach additional sheets if necessary. **Resumes will not be accepted in lieu of completing this section of the application.**

May we contact your present employer?       Yes     No

<b>A</b>	FROM:		TO:		PRESENT OR LAST EMPLOYER:	ADDRESS:	<input type="checkbox"/> FULL TIME	SALARY:
	MONTH	YEAR	MONTH	YEAR	SUPERVISOR'S NAME, TITLE, & TELEPHONE NUMBER:		<input type="checkbox"/> PART TIME	
JOB TITLE:								
DUTIES:								
<b>B</b>	FROM:		TO:		PREVIOUS EMPLOYER:	ADDRESS:	<input type="checkbox"/> FULL TIME	SALARY:
	MONTH	YEAR	MONTH	YEAR	SUPERVISOR'S NAME, TITLE & TELEPHONE NUMBER:		<input type="checkbox"/> PART TIME	
JOB TITLE:								
DUTIES:								
<b>C</b>	FROM:		TO:		PREVIOUS EMPLOYER:	ADDRESS:	<input type="checkbox"/> FULL TIME	SALARY:
	MONTH	YEAR	MONTH	YEAR	SUPERVISOR'S NAME, TITLE & TELEPHONE NUMBER:		<input type="checkbox"/> PART TIME	
JOB TITLE:								
DUTIES:								
<b>D</b>	FROM:		TO:		PREVIOUS EMPLOYER:	ADDRESS:	<input type="checkbox"/> FULL TIME	SALARY:
	MONTH	YEAR	MONTH	YEAR	SUPERVISOR'S NAME, TITLE & TELEPHONE NUMBER:		<input type="checkbox"/> PART TIME	
JOB TITLE:								
DUTIES:								
<b>E</b>	FROM:		TO:		PREVIOUS EMPLOYER:	ADDRESS:	<input type="checkbox"/> FULL TIME	SALARY:
	MONTH	YEAR	MONTH	YEAR	SUPERVISOR'S NAME, TITLE & TELEPHONE NUMBER:		<input type="checkbox"/> PART TIME	
JOB TITLE:								
DUTIES:								

Please identify and explain all periods of unemployment in excess of one month during the past 10 years:

From:	To:	Reason for Unemployment:

**READ THIS STATEMENT BEFORE SIGNING**

I hereby certify that the information supplied on this application is true and correct to the best of my knowledge. I understand that any misrepresentation, falsification or omission of information on this application may result in my failure to receive an offer of employment, or if I am hired, may result in discharge from employment. Unless otherwise noted, I agree that any of the statements I have made herein may be verified by the District, which verification may include contact with my former employers and educators.

If employed, I agree to observe all rules, regulations, policies, and procedures as they relate to Westlands Water District employees. I agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, at the discretion of myself or the District.

I understand that all offers of employment are conditioned on my ability to provide proof of my identity and legal ability to work in the United States, and on the satisfactory completion of a post-offer medical screening.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**WESTLANDS WATER DISTRICT**  
**APPLICANT QUESTIONNAIRE**

Name: \_\_\_\_\_ Position applying for: \_\_\_\_\_

The following information is requested to assist in implementing the District's Affirmative Action and Equal Employment Opportunity policy. Submission of this information is strictly voluntary and is not required to apply for the position.

**Please check one:**

How did you learn of this job opening?

- Newspaper Ad \_\_\_\_\_  WWD Job Interest Card  WWD Employee  
Name of Publication
- Internet \_\_\_\_\_  Trade Publication \_\_\_\_\_  
Name of Site Name of Publication
- Other - please describe \_\_\_\_\_

**Please check one:**

- Male  Female

**After reviewing the Notice of Job Opening for this position, please check one:**

- I can perform the essential functions of the position **without** reasonable accommodations.
- I can perform the essential functions of the position **with** reasonable accommodations.

Please describe the type of assistance or accommodations needed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please check the one category which best describes you:

- White** (not of Hispanic origin) – A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.
- Black** (not of Hispanic origin) – All persons having origins in any of the Black racial groups of Africa.
- Hispanic** – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
- Asian or Pacific Islander** – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- American Indian or Alaskan Native** – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
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