



**Ticaboo Utility Improvement District**

**APPLICATION FOR EMPLOYMENT**

As an EQUAL EMPLOYMENT OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER, TUID does not discriminate against applicants or employees because of their age, race, color, sexual orientation, religion, national origin, gender (except where gender is a bonafide occupational qualification) or an any other basis prohibited by law. Furthermore, TUID will not discriminate against any applicant or employee because he or she is mentally or physically disabled, a disabled veteran, or a veteran of the Vietnam era, provided he or she is qualified and meets the requirements established by TUID for the job.

|  |         |          |                        |                                  |
|--|---------|----------|------------------------|----------------------------------|
| <b>PLEASE TYPE OR PRINT CLEARLY</b>  |         |          |                        | DATE                             |
| NAME (Last)  | (First) | (Middle) | SOCIAL SECURITY NUMBER |                                  |
| CURRENT ADDRESS (Street)   | (City)  | (State)  | (Zip Code)             | PHONE NUMBER<br>Area Code<br>( ) |
| RESIDENT ADDRESS (Street)<br><i>(If different from above)</i>  | (City)  | (State)  | (Zip Code)             | PHONE NUMBER<br>Area Code<br>( ) |
| ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NOT, STATE YOUR DATE OF BIRTH _____ |         |          |                        |                                  |

|   |  |  |
|---|--|--|
| <b>TYPE OF POSITION DESIRED</b>   |  |  |
| POSITION APPLIED FOR:   |  |  |
| <input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME <input type="checkbox"/> SUMMER <input type="checkbox"/> TEMPORARY <input type="checkbox"/> OTHER   |  | SALARY EXPECTED  |
| WILL YOU RELOCATE?<br><input type="checkbox"/> YES <input type="checkbox"/> NO  | WILL YOU TRAVEL?<br><input type="checkbox"/> YES <input type="checkbox"/> NO | DATE AVAILABLE TO WORK WITH TUID                         |
| HAVE YOU EVER WORKED FOR TUID?<br><input type="checkbox"/> YES <input type="checkbox"/> NO  | IF YES, WHEN?  |  |
| HAVE YOU EVER APPLIED TO TUID?<br><input type="checkbox"/> YES <input type="checkbox"/> NO  | IF YES, WHEN?  |  |
| To comply with the Immigration Reform and Control Act of 1986, if you are hired you will be required to provide <b>documents to establish your</b> identity and your authorization to be employed in the United States. Such documents will be required within the first three (3) business days following your hire, or upon your first work day if your employment period will be less than (3) days. |  |  |
| HOW WERE YOU REFERRED TO TUID?  |  |  |
| IF OFFERED EMPLOYMENT, ARE YOU WILLING TO TAKE A PHYSICAL EXAM AT OUR EXPENSE IF THE NATURE OF THE JOB REQUIRES ONE?  |  | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| IF OFFERED EMPLOYMENT, ARE YOU WILLING TO TAKE A DRUG SCREEN AT OUR EXPENSE IF THE NATURE OF THE JOB REQUIRES ONE?  |  | <input type="checkbox"/> YES <input type="checkbox"/> NO |

**GENERAL BACKGROUND INFORMATION**

**CRIMINAL HISTORY**

Have you every been convicted, pled guilty, "no contest", or admitted guilt (including participation in a first time offender program) to any misdemeanor or felony crime?  YES  NO

If yes, EXPLAIN (WHERE) (WHEN) (CHARGED) (SENTENCE)

(Disclosure of a criminal record will not necessarily disqualify you for employment. Each conviction will be evaluated on its own merits with respect to time, circumstances, and seriousness, in relation to the job for which you are applying.)

**MILITARY SERVICE RECORD**

HAVE YOU EVER BEEN A MEMBER OF THE ARMED FORCES OF THE UNITED STATES?  YES  NO

IF YES, LIST ANY SPECIAL SKILLS OR ABILITIES YOU DEVELOPED WHILE IN MILITARY SERVICE WHICH DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.

**RECORD OF EDUCATION**

| Name and Address of School                        | Dates Attended |         | Graduated |    | Type of degree/diploma received or expected | Major / Minor Fields of Study |
|---|----------------|---------|-----------|----|---|-------------------------------|
|   | From           | To      | YES       | NO |   |                               |
|   | Mo./Yr.        | Mo./Yr. |           |    |   |                               |
| High School<br>(Last Attended)                    |                |         |           |    |   |                               |
| Colleges / Universities                           |                |         |           |    |   |                               |
| Graduate School                                   |                |         |           |    |   |                               |
| Other<br>(Business, Technical, Secretarial, Etc.) |                |         |           |    |   |                               |

**RECORD OF EDUCATION (Continued)**

LIST ANY CLUBS, ORGANIZATIONS, SOCIETIES, OR PROFESSIONAL GROUPS TO WHICH YOU BELONG WHICH HAVE A DIRECT BEARING UPON YOUR QUALIFICATIONS FOR THE JOB WHICH YOU ARE SEEKING (INDICATE REGISTRATION NUMBERS IF APPLICABLE TO THE POSITION FOR WHICH YOU ARE APPLYING.)

LIST ANY HOBBIES OR INTEREST WHICH HAVE A DIRECT BEARING ON THE JOB FOR WHICH YOU ARE APPLYING.

LIST ANY SPECIAL SKILLS OR ABILITIES WHICH DIRECTLY RELATE TO THE JOB FOR WHICH YOU ARE APPLYING.

DO YOU POSSESS A VALID CURRENT DRIVER'S LICENSE (ONLY FOR JOBS REQUIRING DRIVING A VEHICLE)?

YES  NO

DRIVER'S LICENSE NUMBER AND STATE \_\_\_\_\_

**EXPERIENCE**

(Most recent Experience first)

| 1. NAME AND ADDRESS OF EMPLOYER       |               | STARTING POSITION         | ENDING POSITION |
|---------------------------------------|---------------|---------------------------|-----------------|
|                                       |               | <b>SALARY</b>             |                 |
|                                       |               | Starting                  | Ending          |
| FROM: (MO / YR)                       | TO: (MO / YR) | \$                        | \$              |
| PHONE NUMBER<br>Area Code<br>(      ) |               | <b>REASON FOR LEAVING</b> |                 |
|                                       |               |                           |                 |

| 2. NAME AND ADDRESS OF EMPLOYER       |               | STARTING POSITION         | ENDING POSITION |
|---------------------------------------|---------------|---------------------------|-----------------|
|                                       |               | <b>SALARY</b>             |                 |
|                                       |               | Starting                  | Ending          |
| FROM: (MO / YR)                       | TO: (MO / YR) | \$                        | \$              |
| PHONE NUMBER<br>Area Code<br>(      ) |               | <b>REASON FOR LEAVING</b> |                 |
|                                       |               |                           |                 |

| 3. NAME AND ADDRESS OF EMPLOYER       |               | STARTING POSITION         | ENDING POSITION |
|---------------------------------------|---------------|---------------------------|-----------------|
|                                       |               | <b>SALARY</b>             |                 |
|                                       |               | Starting                  | Ending          |
| FROM: (MO / YR)                       | TO: (MO / YR) | \$                        | \$              |
| PHONE NUMBER<br>Area Code<br>(      ) |               | <b>REASON FOR LEAVING</b> |                 |
|                                       |               |                           |                 |

| EXPERIENCE (Continued)                |               |                   |        |                              |
|---------------------------------------|---------------|-------------------|--------|------------------------------|
| 4. NAME AND ADDRESS OF EMPLOYER       |               | STARTING POSITION |        | ENDING POSITION              |
|                                       |               |                   |        | NAME AND TITLE OF SUPERVISOR |
|                                       |               | SALARY            |        |                              |
|                                       |               | Starting          | Ending |                              |
| FROM: (MO / YR)                       | TO: (MO / YR) | \$                | \$     | REASON FOR LEAVING           |
| PHONE NUMBER<br>Area Code<br>(      ) |               |                   |        |                              |

| 5. NAME AND ADDRESS OF EMPLOYER       |               | STARTING POSITION |        | ENDING POSITION              |
|---------------------------------------|---------------|-------------------|--------|------------------------------|
|                                       |               |                   |        | NAME AND TITLE OF SUPERVISOR |
|                                       |               | SALARY            |        |                              |
|                                       |               | Starting          | Ending |                              |
| FROM: (MO / YR)                       | TO: (MO / YR) | \$                | \$     | REASON FOR LEAVING           |
| PHONE NUMBER<br>Area Code<br>(      ) |               |                   |        |                              |

| STATEMENT CERTIFICATION<br>(SIGNATURE OF APPLICANT REQUIRED)   |      |
|--|------|
| <p><b>This application shall only remain active for 60 days. After 60 days, if you are interested in employment with TUID, you must fill out a new application.</b></p> <p>I hereby certify that all statements made in this application are true, complete and correct to the best of my knowledge and belief.</p> <p>I understand and agree that any misrepresentation or omission of facts in my application may be justification for refusal to hire, or termination of employment.</p> <p>I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between TUID and me for either employment or for the providing of any benefit. If an employment relationship is established, I understand that my employment can be terminated, at any time for any reason, with or without cause, at the option of either TUID or myself.</p> <p>In signing this form, I certify that I understand all the questions and statements in this application.</p> <p>Further, if granted a position with TUID, I will comply with TUID's: rules; regulations; policies; and tariffs.</p> |      |
| SIGNATURE OF APPLICANT   | DATE |