

Rancho Pauma Mutual Water Company
Employment Application

Programs, services, and employment are equally available to everyone. Please inform the Administrative Manager if you require reasonable accommodation for the application or interview.

Position applied for: _____

How were you referred to us: _____

Applicant Data:

Full name (Last, First, Middle): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Date available to start: _____

Salary requirement: _____

If you are under 18 and we require a work permit, can you furnish one? Yes No

If no, please explain: _____

Have you ever worked for this company? Yes No

If yes, when? _____

Are you legally allowed to work in the United States? Yes No

Type of employment desired: Full Time Part Time

Employment History:

Dates of employment: From _____ to _____

Position(s) held: _____

Firm: _____

Address: _____

Phone: _____

Supervisor: _____

Responsibilities: _____

Reason for leaving: _____

Dates of employment: From _____ to _____

Position(s) held: _____

Firm: _____

Address: _____

Phone: _____

Supervisor: _____

Responsibilities: _____

Reason for leaving: _____

Dates of employment: From _____ to _____

Position(s) held: _____

Firm: _____

Address: _____

Phone: _____

Supervisor: _____

Responsibilities: _____

Reason for leaving: _____

Licenses and Certifications:

Do you currently possess a valid drivers license? Yes No

Drivers license number: _____ Issuing state: _____

Do you currently possess any other licenses or certifications? Yes No

If yes, please list: _____

I certify that my answers are true and complete to the best of my knowledge. I authorize the Company to make any employment-related inquires as may be necessary for an employment decision with the Company.

I hereby release employers, schools, or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant: _____ Date: _____