McCurtain County Rural Water District #5

Employment Application

An Equal Opportunity Employer Company is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring reasonable accommodation in the application and/or interview process should notify a representative of the organization.

Applicant Information	
Applicant Name:	_
Address: City:	
State & Zip:	
Home phone:	Cell Phone:
Email Address:	
Dayley and Dayle's and	
Employment Positions	
Positions (s) applying for:	
How were you referred to the Company?	
Are you applying for :	
• Temporary work - such as summer or holiday wo	ork?[]Y or[]N
• Regular part-time work? [] Y or [] N	
• Regular full-time work? [] Y or [] N	
• What days and hours are you available for work?	?
 If applying for temporary work, when will you b 	e available?
• If hired, on what date can you start working?	
• Can you work on the weekends?	
• Can you work evenings? [] Y or [] N [] Y or	[]N
• Are you available to work overtime? [] Y or [] N
Salary desired: \$	
Personal Information:	
• Have you ever applied to/ worked for Company	before?[]Y or[]N

	Do you have any friends, relatives, or acquaintances working for Company? [] Y or [] N
	If yes, state name & relationship:
	If hired, would you have transportation to/from work? [] Y or [] N
•	Are you over age 18?(Under 18, hire is subject to verification of minimum legal age)[] Y or [] N
•	If hired, would you be able to present evidence of your U.S. citizenship or proof of your legal right to work in the
	United States? [] Y or [] N
	If hired, are you willing to submit to and pass a controlled substance test? [] Y or [] N
•	
•	Are you able to perform the essential functions of the job for which you are applying, either
	with without reasonable accommodation? [] Y or [] N
•	If no, describe the functions that cannot be performed
*	Have you ever been convicted of a criminal offense (felony or misdemeanor)? [] Y or [] N
•	If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the
	case
Note:	No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The
date o	If the offense, the nature of the offense, including any significant details that affect the description of the
event.	and the surrounding circumstances and the relevance of the offense to the position(s) applied for may,
	ver, be considered)
	ation, Training and Experience
•	High School: School name:
	School address:
	School city, state, zip:
	Number of years completed:
	Did you graduate? [] Y or [] N
	Degree I diploma earned:
	College / University:
	School name:
	School address:
	School city, state, zip:
	Number of years completed:
	Did you graduate? [] Y or [] N
	Degree I diploma earned:
*	Vocational School:
	Name:
	Address:
	City, state, zip:
	Number of years completed:
	Did you graduate? [] Y or [] N
	Degree I diploma?:

	Military: Branch:
	Rank in Military:
	Total Years of Service:
	Skills/duties: Related details:
	Related details:
Additi	onal Information
•	Do you speak, write or understand any foreign languages? [] Y or [] N
•	If yes, describe which languages(s) and how fluent of a speaker you consider yourself to be.
•	Do you have any other experience, training, qualifications, or skills which you feel should be brought to our
	attention, in the case that they make you especially suited for working with us?
	[] Y or [] N
	If yes, please explain
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Arc	you currently employed? [] Y or [] N ou are currently employed, may we contact your current employer? [] Y or [] N
Are If y	you currently employed? [] Y or [] N
Are If y	you currently employed? [] Y or [] N ou are currently employed, may we contact your current employer? [] Y or [] N , please describe past and present employment positions, dating back five years. Please account for iods of unemployment. Even if you have attached a resume, this section must be completed.
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	Position & Duties:	10
	Reason for Leaving:	
	May we contact this employer for references? [] Y or [] N	
	3. Name of Employer:	
	Name of Supervisor:	
	Telephone Number:	
	Business Type:	
	Address:	
	City, state, zip:	
	Length of Employment (Include Dates):	
	Position & Duties:	
	Reason for Leaving:	
Refere	ences	
List be	elow three persons who have knowledge of your work perfor include professional references only.	mance within the last four years.
	-	
	ne - First, Last:ephone Number:	
	dress:	
	cupation:	
	nber of Years Acquainted:	
2. Nan	ne - First, Last:	
	ephone Number:	
Add	lress:	
City	y, state, zip:	
	eupation:	
Nun	nber of Years Acquainted:	
	ne - First, Last:	
	ephone Number:	
	dress:	
	y, state, zip:	
Occ	cupation:	
Nun	mber of Years Acquainted:	

Please Read and Initial Each Paragraph, then Sign Below

I certify that I have not purposely withheld any information that might adversely affect my chances of hiring. I attest to the fact that the answers given by me are true & correct to the best of my knowledge and bility. I understand that any omission (including any misstatement) of material fact on this application or on my document used to secure can be grounds for rejection of application or, if I am employed by this company, terms for my immediate expulsion from the company.
I understand that if I am employed, my employment is not definite and can be terminated at any time ither with or without prior notice, and by either me or the company.
I permit the company to examine my references, record of employment, education record, and any ther information I have provided. I authorize the references I have listed to disclose any information related to my work record and my professional experiences with them, without giving me prior notice of such disclosure. In addition, I release the company, my former employers & all other persons, corporations, partnerships & ssociations from any & all claims, demands or liabilities arising out of or in any way related to such xamination and evaluation.
Applicant's Signature:
Date: