

Application for Employment Handy Sanitary District

Handy Sanitary District is an Equal Opportunity Employer and this application is designed to provide Handy Sanitary District with substantial information to insure equal employment opportunities for all applicants. All questions are intended only for the utilization in consideration of employment, without regard to race, color, religion, sex, national origin, age, marital or veteran status, disability, or any other legally protected status.

Position Applied For: _____ Date: _____

Who referred you to us? How did you hear about this position? _____

Personal Information:

Name: _____
First Middle Last

Address: _____

Phone #'s: _____
Home Other(s)

Social Security # _____ Driver's License State & # _____

In case of emergency, notify: _____
Name Phone #

_____ Address

Have you ever been employed with Handy Sanitary District before? ____ Yes ____ No

If yes, reason for separation: _____

Are you above the minimum working age of 18? ____ Yes ____ No

Will you be prepared to produce proof of employment eligibility at the time of employment, in accordance with the Immigration Reform and Control Act of 1986? ____ Yes ____ No

Will you be prepared to allow Handy Sanitary District, at the time of employment, to check your credit? ____ Yes ____ No

Have you ever been convicted of an offense against the law other than a minor traffic violation? ____ Yes ____ No If yes, please explain fully on an additional sheet of paper. (A conviction does not mean you can not be hired. The offense and how recently you were convicted will be evaluated in relation to the job which you are applying.)

Can you perform the essential functions of the job for which you have applied with or without reasonable accommodation? ____ Yes ____ No

Educational Information:

Circle the highest grade/school year completed: 9 10 11 12 13 14 15 16 17 18

Did you graduate from high school or pass the equivalency test? ____H/S ____ GED

	Name and Location	Dates Attended	Years Completed	Did you graduate?	Diploma or Degree Received and Year
High School					
College or University					
Other					

List all fields of work for which you are licensed, registered, or certified, providing dates and sources of issuance: _____

List any academic achievements/extracurricular activities relative to the position applied for: _____

List any additional knowledge, skills, or qualifications relative to the position applied for: _____

Employment Experience:

List present or most recent employer first. Be sure to include military service, if any.

May we contact your current employer? _____ Yes _____ No

Employer: _____ Phone #: _____

Address: _____

Position: _____ Supervisor: _____

Primary Responsibilities: _____

Reason for leaving: _____

Dates employed: _____ Starting Salary _____ Final Salary _____

Employer: _____ Phone #: _____

Address: _____

Position: _____ Supervisor: _____

Primary Responsibilities: _____

Reason for leaving: _____

Dates employed: _____ Starting Salary _____ Final Salary _____

Employer: _____ Phone #: _____

Address: _____

Position: _____ Supervisor: _____

Primary Responsibilities: _____

Reason for leaving: _____

Dates employed: _____ Starting Salary _____ Final Salary _____

Employer: _____ Phone #: _____

Address: _____

Position: _____ Supervisor: _____

Primary Responsibilities: _____

Reason for leaving: _____

Dates employed: _____ Starting Salary _____ Final Salary _____

Employer: _____ Phone #: _____

Address: _____

Position: _____ Supervisor: _____

Primary Responsibilities: _____

Reason for leaving: _____

Dates employed: _____ Starting Salary _____ Final Salary _____

References:

Please provide the information for three persons, excluding previous employers or relatives:

Name _____ Phone # _____

Name _____ Phone # _____

Name _____ Phone # _____

Agreement:

I certify that the statements made in this application are correct and complete to the best of my knowledge and belief. I understand that if I am employed, false or misleading information on this application shall be considered sufficient cause for termination. I hereby authorize Handy Sanitary District to conduct a background check, which will provide the following obtained information: verification of social security number, past addresses, education, professional licenses, past employment, as well as credit history, driving records, criminal and civil records searches, and reference checks. I hereby authorize my previous employers, personal references listed, educational institutions, and other persons/organizations listed on this application for employment to provide Handy Sanitary District with any information requested unless otherwise noted on this application regarding present employer. In the event that Handy Sanitary District is unable to verify any reference stated on this application, it is my responsibility to furnish the necessary documentation.

Signature _____ Date _____