

SAN BERNARDINO VALLEY WATER CONSERVATION DISTRICT

1630 West Redlands Blvd., Suite A
Redlands, CA 92373

Phone: (909) 793-2503
Fax: (909) 793-0188

APPLICATION FOR EMPLOYMENT

It is our policy to comply with all applicable state and federal laws prohibiting discrimination in employment based on race, age, color, sex, religion, national origin, or other protected classification.

Please print – use ink or typewriter.

Position applied for _____

Name _____ Date _____

Address _____
street city state zip

Telephone number _____ Are you over 18 years old? Yes No

Are you authorized to work in the U.S. on an unrestricted basis? Yes No

How did you learn of this opening? _____

Have you worked here before? Yes No

Have you seen a copy of the job description listing the essential functions of the job? Yes No

Can you perform these essential functions with or without reasonable accommodation? Yes No

Are there any hours, shifts or days you cannot or will not work? _____

Are you willing to work overtime as required? Yes No

EDUCATION	NAME & LOCATION OF SCHOOL	MAJOR	DIPLOMA/ DEGREE
High School			
College/University			
College/University			
Other training/Education			

In addition to work history, what other experiences, skills or qualifications especially suit you for this position with our district?

WORK HISTORY

May we contact your present employer? Yes No

Most Recent Employer		Address	Telephone
Date Started	Starting Salary: \$ Per	Starting Position	
Date Left	Starting Salary: \$ Per	Position on Leaving	
Name and Title of Supervisor		Reason for Leaving	
Description of Duties:			
Previous Employer		Address	Telephone
Date Started	Starting Salary: \$ Per	Starting Position	
Date Left	Starting Salary: \$ Per	Position on Leaving	
Name and Title of Supervisor		Reason for Leaving	
Description of Duties:			
Previous Employer		Address	Telephone
Date Started	Starting Salary: \$ Per	Starting Position	
Date Left	Starting Salary: \$ Per	Position on Leaving	
Name and Title of Supervisor		Reason for Leaving	
Description of Duties:			

Is there any information relative to name change, assumed name, or nickname necessary for verification of work and education record? Yes No

APPLICANT'S CERTIFICATION AND AGREEMENT

I certify the facts I provided in this Application for Employment are true and complete to the best of my knowledge. I understand that if I am employed, false statements, omissions or misrepresentations may result in my dismissal. I authorize the San Bernardino Valley Water Conservation District to make an investigation of any of the facts that are set forth in this application.

I am also aware that employment with the San Bernardino Valley Water Conservation District is "at will", which means that the employment relationship may be terminated at any time, with or without prior notice, and for any reason not prohibited by statute. I understand that no supervisor or manager of the district has any authority to alter the "at will" employment status.

I am aware that district policy requires that successful job applicants pass a job-related physical which includes a drug screening test prior to beginning employment.

Date _____ Applicant's Signature _____