

APPLICATION FOR EMPLOYMENT

Davidson Water, Inc. is an Equal Opportunity Employer – All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by law.

PERSONAL INFORMATION

Incomplete information could disqualify you	from furthε	er consideration. Please complete <u>c</u>	<u>ıll</u> fields.
Last Name		_ First Name	MI
Address			_
City	State	ZIP	_
Email	Pho	one Number	_
Are you eligible to work in the U.S.? Yes	s No		
Are you at least 18 years or older? Yes	No		
Have you ever been terminated from emplo	yment or a	sked to resign by an employer?	Yes No
If yes, please provide the company name and	d any detai	ls you wish to share: (Limit 300 cha	ıracters)
Are you able to work overtime and non-stan	dard hours	when job duties so require?	Yes No
Are you able to perform the essential function reasonable accommodation? Yes	ons of the jo	ob for which you are applying, with	າ or without a
EMPLOYMENT DESIRED			
Type of Position you are interested in:			
Are you currently employed? Yes	No If so,	may we contact your present emp	oloyer? Yes No
If currently employed, why are you consider	ing leaving	your current position? (Limit 300 c	haracters)
REFERRAL SOURCE			
How did you hear about this position?			
Have you ever worked for this company before	ore? Y	es No	
If yes, please provide job title and dates of e	mploymen	t:	
Do you have relatives or friends who work fo	or the comp	pany? Yes No	
If yes, please list employee's name and depa	rtment:		

EDUCATION

Level	Name and Location of School	Degree Received	# of Years Attended	Course of Study
High School				
College				
Trade or Business School				
Graduate Work				

Do you belong to an	y professi	nal, trade, business or civic organizations associated with the position for which
you are applying?	Yes	No
If yes, please list:		
(Please omit any ass	ociations	which may reflect your race, color, religion, age, sex, sexual orientation, marital

EMPLOYMENT HISTORY

status or disabilities.)

Include *at least* the last five (5) years of employment history, including periods of unemployment, starting with the most recent and working backwards in time.

Incomplete information could disqualify you from further consideration.

Name of Employer		Phone Number	
Location			
Dates Employed	From:	То:	*If presently employed, leave blank.
Job Title			
Supervisor's Name and Title			
Summarize Duties (Limit of 300 characters)			
Reason for Leaving			

EMPLOYMENT HISTORY CONTINUED

Name of Employer		Phone Number
Location		
Dates Employed	From:	То:
Job Title		
Supervisor's Name and Title		
Summarize Duties		
(Limit of 300 characters)		
Reason for Leaving		
Name of Employer		Phone Number
Location		
Dates Employed	From:	То:
Job Title		
Supervisor's Name and Title		
Summarize Duties (Limit of 300		
characters)		
Reason for Leaving		
Name of Employer		Phone Number
Location		Priorie Number
	Frami	To
Dates Employed	From:	То:
Job Title		
Supervisor's Name and Title		
Summarize Duties		
(Limit of 300 characters)		
Reason for Leaving		

Special Skills or Qualifications

Please list any special skills or qualifications you feel would be beneficial to Davidson Water, Inc. (Limit of 300 characters)

REFERENCES

Give the names of at least three persons not related to	<i>vou</i> whom vou ha	ive known for	at least 3 vears
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Name				Years Acquainted	
Phone		Email Address		,	
Is this a	Personal or Professional reference?	Personal	Profession	al	
How do	you know this reference?	, <u>l</u>			
Name				Years Acquainted	
Phone		Email Address		,	
Is this a	s this a Personal or Professional reference? Personal Professional				
How do	you know this reference?	<u>-</u> L			
Name				Years Acquainted	
Phone		Email Address		rears / toquamited	
	Personal or Professional reference?	Personal	Professiona		
	you know this reference?	reisonai			
110W do	you know this reference:				
account of	Water, Inc. is an equal opportunity emplo frace, color, religion, national origin, citize n, marital status, physical or mental disab	enship status, ances	try, age, sex (inclu	uding sexual harassment	t), sexual
establishe I can term	and that neither the completion of this appear any obligation for Davidson Water, Inc. ninate my employment at any time and found that no representative of Davidson Water	to hire me. If I am h r any reason, with o	ired, I understand r without cause a	d that either Davidson W and without prior notice	Vater, Inc. or e. I
applicatio for emplo	ith my signature below that I have given to on. No requested information has been co syment reference checks. If any information and that this will constitute cause for the de	ncealed. I authorize on I have provided is	Davidson Water, untrue, or if I ha	Inc. to contact reference ve concealed material in	ces provided
Signature	Signature: Date:				
THIS APP Acts of 19 valid app	PLICATION IS VALID FOR 180 DAYS FRO 964, all applications are retained for a plications will be considered for open p ed for future open positions with Davi	OM THE DATE SIGI minimum period positions. You mus	NED ABOVE. In a of one year fror	n the date of submiss	ion. Only
	For Internal Use ONLY	′ - Please do not enter	information in this	area.	
Hired:	Yes No Date Reporting to V	Work:	Sal	lary:	
Positio	n:	Departm	nent:		
Approv	Approved by: Department Supervisor:				