



# IOWA LAKES REGIONAL WATER

## Employment Application

Date \_\_\_\_\_

### APPLICANT INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ M.I. \_\_\_\_\_

Date of Birth \_\_\_\_\_ Social Security # \_\_\_\_\_ Driver's License # \_\_\_\_\_

Street Address \_\_\_\_\_ Apartment/Unit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Position Applied for \_\_\_\_\_ Date Available \_\_\_\_\_ Desired Salary \_\_\_\_\_

Where did you hear about this employment opportunity?

Newspaper/Shopper  Radio (station) \_\_\_\_\_  Internet  Friend/Relative  Other \_\_\_\_\_

Are you a citizen of the United States?  Yes  No If no, are you authorized to work in the U.S.?  Yes  No

Have you ever worked for this company?  Yes  No If so, when? \_\_\_\_\_

Would you require any accommodation(s) in order to perform the job?  Yes  No If yes, explain: \_\_\_\_\_

Are you available to work overtime?  Yes  No

Are you subject to possible recall to work by a former employer?  Yes  No

Do you have a valid Driver License?  Yes  No Expiration Date: \_\_\_\_\_

Do you have a CDL License?  Yes  No If yes, list Class and Endorsements: \_\_\_\_\_

Do you have any equipment operating experience?  Yes  No If yes, list equipment: \_\_\_\_\_

Please list any specific skills that you have that may be applicable. \_\_\_\_\_

You may be required to perform a physical performance test on-site to confirm your ability to perform job requirements. By submitting this application, you release Iowa Lakes Regional Water and its officers and employees from any claims of personal injury arising out of physical performance testing.

### EDUCATION

High School \_\_\_\_\_ Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Did you graduate?  Yes  No Degree \_\_\_\_\_

College \_\_\_\_\_ Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Did you graduate?  Yes  No Degree \_\_\_\_\_

Other \_\_\_\_\_ Address \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Did you graduate?  Yes  No Degree \_\_\_\_\_

## MILITARY SERVICE

Branch \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Rank at Discharge \_\_\_\_\_ Type of Discharge \_\_\_\_\_

If other than honorable, explain \_\_\_\_\_

## PREVIOUS EMPLOYMENT

**MOST RECENT FIRST**

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Ending Salary\$ \_\_\_\_\_

Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference?  Yes  No

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Ending Salary\$ \_\_\_\_\_

Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference?  Yes  No

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_ Starting Salary \$ \_\_\_\_\_ Ending Salary\$ \_\_\_\_\_

Responsibilities \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_ Reason for Leaving \_\_\_\_\_

May we contact your previous supervisor for a reference?  Yes  No

## REFERENCES

Please list 3 professional references. (Former Employers, Persons who can vouch for your work ethic, skills, strengths & achievement)

**Full Name** \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Full Name** \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Full Name** \_\_\_\_\_ Relationship \_\_\_\_\_

Company \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**ADDITIONAL INFORMATION**

List any professional, trade, business or civic activities and offices held. You may exclude membership that would reveal gender, race, religion, national origin, ancestry, age, disability or any other protected status.

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**ADDITIONAL SPACE**

Additional space provided to expand on any points or questions asked previously in this application.

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**AFFIRMATION AND SIGNATURE**

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to my employment, I understand that false or misleading information in my application or interview may result in my release.

Signature \_\_\_\_\_

Date \_\_\_\_\_

## ADDITIONAL STATEMENTS OF ACKNOWLEDGEMENT AND UNDERSTANDING

Please read each statement closely and initial each to indicate you acknowledge and understand.

\_\_\_\_\_ **Equal Employment Opportunity Statement**

This company is committed to the principles of equal employment opportunity and is committed to make employment decisions based on merit. We are committed to complying with all Federal, State and local laws providing for equal employment opportunities, as well as all laws related to terms and conditions of employment. Iowa Lakes Regional Water desires to maintain a work environment that is free of sexual harassment and discrimination due to race, religion, color, national origin, physical or mental disability, age or any other status protected by Federal, State or local laws. Iowa Lakes Regional Water will make reasonable efforts to accommodate those physical or mental limitations of an otherwise qualified employee unless undue hardship would result for Iowa Lakes Regional Water.

\_\_\_\_\_ **Discrimination and Sexual Harassment Policy Statement**

This Company will not tolerate any form of unlawful discrimination, including sexual harassment. Any employee who engages in unlawful discrimination or sexual harassment will be subject to appropriate discipline, up to and including termination. Prohibited sexual harassment is defined as follows: Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitutes sexual harassment when (1) submission to such conduct is made whether explicitly or implicitly a term or condition of an individual's employment; (2) Submission to or action of such conduct by an individual is used as the basis for employment decisions affecting such individuals; or (3) Such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

\_\_\_\_\_ **Disclosure to Applicants Concerning Drug/Alcohol Testing**

If you are offered a position with Iowa Lakes Regional Water, you will be given a drug/alcohol test as a condition of employment. Your refusal to timely submit to a drug/alcohol test or your failure to pass such a test means you will not be employed by this Company. The medical professional who reviews the test results will be a company employee. The test results will be kept confidential. The individual undergoing testing will not be directly observed while providing the specimen unless there are reasonable grounds to believe the individual may alter or substitute the specimen. Negative test results are required as a condition of employment. I understand periodic or reasonable suspicion testing may occur during the term of employment.

\_\_\_\_\_ **At-Will Employment**

I understand and agree that if I am employed, my employment will be "at-will", which means that Iowa Lakes Regional Water may terminate the employment relationship at any time, with or without cause and with or without notice. Likewise, Iowa Lakes Regional Water will respect my right to terminate my employment at any time, with or without cause and with or without notice. I further understand that any prior representation, whether expressed or implied to the contrary is hereby superseded and that no promise or representation contrary to the foregoing is binding on Iowa Lakes Regional Water unless made in writing and signed by Iowa Lakes Regional Water's president.

\_\_\_\_\_ **Testing Authorization**

If offered a position with Iowa Lakes Regional Water, I hereby agree to any legally-permitted physical, psychological, skill, drug or medical test required by Iowa Lakes Regional Water as a condition of employment.

\_\_\_\_\_ **Investigation Authorization**

I authorize investigation into all statements and references contained in this application. Said investigation may include credit, driving, criminal background, references and other background checks. By applying for this job, I also authorize post-hire investigation into my credit, driving and criminal background.

\_\_\_\_\_ **Company Obligation**

I understand and agree that Iowa Lakes Regional Water's acceptance of this job application does not mean that a position for which I am qualified is open (unless specifically posted) or that Iowa Lakes Regional Water has agreed to hire me. I understand that Iowa Lakes Regional Water is under no obligation to hire me as the result of accepting this completed application.

I have read and understand the above policy statements and agree to be bound by them if employed by Iowa Lakes Regional Water.

Signature \_\_\_\_\_

Date \_\_\_\_\_