



Valley Center Municipal Water District Employment Application

OFFICIAL
USE ONLY

29300 Valley Center Road
P. O. Box 67
Valley Center, CA 92082

760-735-4500 office
760-749-6478 f a x
www.vcmwd.org

Personal Information

Last Name	First Name	Middle Initial	Today's Date
Are there other names under which you have worked?	Phone Number	Email Address	
Street Address	City	State	Zip
What position are you applying for?	Desired Starting Salary	Your Availability Full time <input type="checkbox"/> Part time <input type="checkbox"/>	Are you willing to work overtime, swing or shift duty? <input type="checkbox"/> Yes <input type="checkbox"/> No
Why are you interested in this position?			
If hired, could you provide proof of your legal right to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have bilingual skills in English and Spanish? <input type="checkbox"/> Yes <input type="checkbox"/> No		Date of Availability:

Education

High School Name: Location:	Did you graduate?	Diploma or GED
College/University/Trade School Name: Location:	Major	Degree/Diploma
College/University/Trade School Name: Location:	Major	Degree/Diploma
Professional Certificates (Include date of issuance) (Water/Wastewater/Engineering/Clerical, etc.)	Software Applications/Clerical Skills	Equipment/Machines operated

A condition of employment is that an applicant must pass a job-related physical examination, *which for safety-sensitive positions only*, will include a drug and alcohol screening test, to be administered by a District appointed physician.

Applicant's Signature _____ Date _____

Employment History

Beginning with your present or last position, list the three most recent jobs you have held, including a summary of major duties and computer hardware/software use that relate to the position for which you are applying. If you need more space to describe other positions where you developed relevant experience, attach a page outlining that employment and experience. Include military experience that may relate to the position you are seeking. If you have a resume, attach it to this application.

Employer		Type of Business	
Address		Phone	Are you eligible to be rehired? <input type="checkbox"/> Yes <input type="checkbox"/> No
Dates of Employment			
From:		To:	
Starting Job Title	Last Job Title	Supervisor's Name	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving			
Please Describe Job Duties and Responsibilities (Attach additional pages if needed)			

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Dates of Employment			
From:		To:	
Starting Job Title	Last Job Title	Supervisor's Name	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No
Reason for Leaving			
Please Describe Job Duties and Responsibilities (Attach additional pages if needed)			

Please describe any periods of time not accounted for in your Employment History, including any periods of unemployment. (Attach additional pages if needed.)

**DISCLOSURE AND AUTHORIZATION FOR BACKGROUND INVESTIGATION
VALLEY CENTER MUNICIPAL WATER DISTRICT**

As an applicant for employment, I hereby authorize VALLEY CENTER MUNICIPAL WATER DISTRICT to conduct a limited background investigation of my personal history. I understand this investigation may include my work history, criminal conviction records, pending trials and warrants, driving records, and references obtained from business and personal associates. If I am denied employment, either wholly or partly because of information contained in the report, VALLEY CENTER MUNICIPAL WATER DISTRICT will tell me so.

I hereby fully release VALLEY CENTER MUNICIPAL WATER DISTRICT, and its employees, directors, agents, successors and assigns, and all other parties involved in conducting this background investigation, including but not limited to VALLEY CENTER MUNICIPAL WATER DISTRICT and those companies or individuals who provide information concerning me, from all claims or actions for any liability whatsoever related to this process.

I also certify that all representations made by me, and all information that I have provided, are true and accurate to the best of my knowledge. I understand that any misrepresentation or omission of facts, or my providing of false information, will exclude me from further consideration as an applicant. It may result in the termination of my employment if I am hired by VALLEY CENTER MUNICIPAL WATER DISTRICT before their discovery of the misrepresentation, omission or falsity.

I also understand that this will be considered a continuing authorization, and will remain valid until such time as I inform VALLEY CENTER MUNICIPAL WATER DISTRICT, in writing, that I wish to revoke it.

I understand that this Authorization is not an offer for employment, nor is it a contract for employment.

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If you wish to have a free copy of the completed report, please check this box
And VALLEY CENTER MUNICIPAL WATER DISTRICT will give one to you.

(Date)

(Applicant's Signature)

(Print Name)

(Date)

(Company Rep. Signature)

(Print Name, Title)

The following agency will be providing the report to VALLEY CENTER MUNICIPAL WATER DISTRICT:

Backgrounds Online
1915 21st Street
Sacramento, CA 95811
Phone (800) 838-4804
www.backgroundsonline.com