BEAR CREEK SPECIAL UTILITY DISTRICT EMPLOYMENT APPLICATION

(Please Print) Please answer all questions.

Name:	Social Security #:					
Address:						
Street	City	State	Zip			
Phones: Day ()	Night ()	Fax ()			
(Information required for drivers lice	nse and insurance verific	cation)				
Date of Birth:	Drivers License #:					
Have you ever been convicted	of a felony or DWI?	() Yes () No				
Are you related to any Board	Member or Employe	e of Bear Creek S	UD?			
() Yes () No	0					
Position or type of employmen						
Available for: () Full Time	() Part Time ()	Temporary				
Date available:		Overtime?: () Y	es () No			
Employer:						
Address:		` '				
	Supervisor:					
Duties:						
Specific equipment, machine						
Wage (upon leaving):	Reason for le	eaving:				
Employer:		Dates: From	То			
Address:		Phone: ()				
Position held:		_ Supervisor:				
Duties:						
Specific equipment, machine	ry, computers operat	ted:				
Wage (upon leaving):	Reason for l	eaving:				

Employer:		Dates:	To		
Address:		Phone:	_Phone: ()		
Position held:					
Duties:					
Specific equipment r	nachinery com	puters operated:			
	=	_ Reason for leaving: _			
		8			
Education					
Name	Location	Degree/diploma	Did you (Graduate?	
High School:					
College:					
Graduate School:					
Business/Trade:					
Civilla /Diamas list or	i-1 -1-:11		· · · · · · · · · · · · · · · · · · ·		
skills (Fleuse list sp	jeciui skiiis u	nd equipment you co	in operace.)		
= -		d carefully and sign	•		
		this application and accom ar Creek Special Utility Dis			
		e statements or failures to			
be sufficient to disqualify dismissal. This application		nt, or, if employed, may be	grounds for my	immediate	
		or statements by represent contract. I further underst			
not indicate there is a pos	sition open and do	oes not obligate Bear Creek	Special Utility	District to hire. If	
		ecial Utility District work r he right to revise its policie			
part, at any time.	District retains t	ne right to revise its policie	es of procedures	s, iii whole of iii	
Lunderstand if Lam	considered for er	nployment I agree to subm	it to a driver's li	cense and	
		and a drug test before em			
Date:	Signat	ure:			
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