



WEST STANISLAUS IRRIGATION DISTRICT

P.O. Box 37, Westley, CA 95387
 116 "E" Street (209) 894-3091
 An Equal Opportunity Employer

Name (Last, First, MI)	Date
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Mailing Address (include apartment number, if any)

City	State	Zip Code
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Home Phone	Other Phone	When Are You Available To Start Work?
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Name & Location of College/University/High School:

Name	City	State	Degree

Special Skills, Accomplishments, Awards: (List anything that may help you obtain employment, such as machine operating skills, computer skills, memberships in professional organizations or societies, etc.)

Job-related licenses/certificates, such as hazardous materials, pesticide applicator, etc.

License/Certificate	Date	Licensing Agency

Do you speak or read any language other than English? _____

Position you are applying for: _____

In order to determine if you are of legal working age, are you 18 years of age or older? Yes No

If you are under 18 years of age, will you be able to furnish a work permit? Yes No

EMPLOYMENT HISTORY

Name & Address of Employer	Dates Employed FROM: ____/____/____ TO: ____/____/____	Avg Hours/Week
Job Title	Supervisor Phone Number ()	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>

Reason for leaving:

Description of work:

Name & Address of Employer	Dates Employed FROM: ____/____/____ TO: ____/____/____	Avg Hours/Week
Job Title	Supervisor Phone Number ()	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>

Reason for leaving:

Description of work:

Name & Address of Employer	Dates Employed FROM: ____/____/____ TO: ____/____/____	Avg Hours/Week
Job Title	Supervisor Phone Number ()	May we contact? Yes <input type="checkbox"/> No <input type="checkbox"/>

Reason for leaving:

Description of work:

Use Additional Sheets If Necessary

During the last 10 years, were you fired from any job for any reason, quit after you were told you would be fired, or leave by mutual agreement because of specific problems? Explain:

Yes
 No

Use back of page if necessary

Other information that you would like to share that would be helpful in evaluating your potential for hire

Use back of page if necessary

REFERENCES

Name	Phone Number	Relationship/How Long Known?
Name _____ Street Address _____ City/Zip _____	()	Relationship or How _____ Reference Is Known _____ How Long Known Yrs _____ Mos _____
Name _____ Street Address _____ City/Zip _____	()	Relationship or How _____ Reference Is Known _____ How Long Known Yrs _____ Mos _____
Name _____ Street Address _____ City/Zip _____	()	Relationship or How _____ Reference Is Known _____ How Long Known Yrs _____ Mos _____

YOU MUST SIGN THIS APPLICATION. *Read the following carefully before you sign.*

- I understand that a false statement on any part of my application may be grounds for not hiring me, or for firing me after beginning work.
- I understand that any information I give may be investigated as allowed by law.
- I consent to the release of information about my ability and fitness for employment by employers, schools, law enforcement agencies and other individuals and organizations.
- I hereby authorize the West Stanislaus Irrigation District to check any references I have provided.
- I certify that, to the best of my knowledge and belief, all of my statements are true, correct, complete, and made in good faith.

Applicant Signature

Date

We are an equal opportunity employer. Race, religion, color, sex, gender, gender identity, pregnancy, sexual orientation, age, national origin, ancestry, marital status, domestic partner status, veteran status, or physical or mental disability, or any other class protected by statute, are not factors in employment, promotion, compensation, or termination.

It is the policy of the West Stanislaus Irrigation District to keep applications "active" for a total period of thirty (30) days.