

# APPLICATION FOR EMPLOYMENT

Santa Fe Irrigation District  
PO Box 409  
Rancho Santa Fe, CA 92067-0409  
Telephone: (858) 756-2424

An Equal Opportunity Employer

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, ancestry, marital status or veteran status, or the presence of a non-job-related medical condition or handicap.

(PLEASE PRINT)

Date of Application: \_\_\_\_\_

Position(s) Applied For \_\_\_\_\_

Name \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City State Zip Code

Telephone (\_\_\_\_) \_\_\_\_\_

Email Address \_\_\_\_\_

Referral Source:

Website  Friend  Relative  BC Water Jobs  Newspaper

Other \_\_\_\_\_

If employed and you are under 18, can you furnish a work permit { } yes { } no

Have you filed an application here before? { } yes { } no If yes, give date \_\_\_\_\_

Have you ever been employed here before { } yes { } no If yes, give date \_\_\_\_\_

Are you employed now? { } yes { } no

If yes, may we contact your current employer? { } yes { } no

Are you prevented from becoming lawfully employed in this country because of Visa or Immigration Status? { } yes { } no (Proof of citizenship may be required upon employment)

On what date would you be available for work? \_\_\_\_\_

Are you available to work:  Full time  Part Time  Shift Work  Temporary

Are you on layoff and subject to recall? { } yes { } no

Can you travel if the job requires it? { } yes { } no

**Additional questions**

Have you had your driver's license suspended in the last five years?       yes     no

Have you had a drunk driving conviction in the last five years?       yes     no

How many moving vehicle violations in the last five years: \_\_\_\_\_

Have you ever been refused a surety bond?       yes     no

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

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Have you been convicted of a felony within the last seven (7) years?

yes       no

Have you been convicted of a drug related offense within the last two (2) years?

yes       no      (conviction will not necessarily disqualify applicant from employment)

If yes, please explain \_\_\_\_\_

\_\_\_\_\_

Are you a Veteran of the U.S. Military service?       yes       no

If yes, what branch \_\_\_\_\_

Indicate languages you speak, read and/or write:

|       | Fluent | Good | Fair |
|-------|--------|------|------|
| Speak |        |      |      |
| Read  |        |      |      |
| Write |        |      |      |

List professional, trade, business, or civic activities and offices held. (You may exclude those which indicate race, color, religion, sex or national origin):

\_\_\_\_\_

\_\_\_\_\_

Please provide the name, address and telephone number of three references that are not related to you and are not previous employers.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



|                              |
|------------------------------|
| <b>Employment Experience</b> |
|------------------------------|

List your employment experience in chronological order to cover ten years. Include military service assignments and volunteer activities. Exclude organization names that indicate race, color, religion, sex, or national origin.

|                     |        |                |       |                |
|---------------------|--------|----------------|-------|----------------|
| Employer:           | Phone: | Dates employed |       | Work Performed |
| Address:            |        | From           | To    | Job Title:     |
| Supervisor:         |        |                |       |                |
| Reason for Leaving: |        | Annual Salary  |       | Duties:        |
|                     |        | Start          | Final |                |
|                     |        |                |       |                |
| Employer:           | Phone: | Dates employed |       | Work Performed |
| Address:            |        | From           | To    | Job Title:     |
| Supervisor:         |        |                |       |                |
| Reason for Leaving: |        | Annual Salary  |       | Duties:        |
|                     |        | Start          | Final |                |
|                     |        |                |       |                |
| Employer:           | Phone: | Dates employed |       | Work Performed |
| Address:            |        | From           | To    | Job Title:     |
| Supervisor:         |        |                |       |                |
| Reason for Leaving: |        | Annual Salary  |       | Duties:        |
|                     |        | Start          | Final |                |
|                     |        |                |       |                |
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| Address:            |        | From           | To    | Job Title:     |
| Supervisor:         |        |                |       |                |
| Reason for Leaving: |        | Annual Salary  |       | Duties:        |
|                     |        | Start          | Final |                |
|                     |        |                |       |                |

If you need additional space, please continue on a separate sheet of paper and attach to application.

**Field Employment**

Water Works Experience:

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Water Works Schooling:

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Filtration Plant Employment:

Name of Plant \_\_\_\_\_  
 Type of Plant \_\_\_\_\_  
 MGD of Plant \_\_\_\_\_ How long at Plant \_\_\_\_\_

Current Water Treatment Operator's Certification:

Operator Grade \_\_\_\_\_ Operator number \_\_\_\_\_  
 Certificate number \_\_\_\_\_ Date Issued \_\_\_\_\_  
 Issuing Agency \_\_\_\_\_

Current Distribution Certification \_\_\_\_\_ Certificate Number \_\_\_\_\_

Can you operate a backhoe?       never tried       moderately well       proficient  
 If yes, what type of backhoe \_\_\_\_\_  
 If yes, where, when and for whom:

Mark the following types of plumbing work you have performed:

installed asbestos pipe       installed water meters

What type of construction work have you performed and what equipment have you operated?

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**Office Employment**

Typing \_\_\_\_\_ words per minute

Computer skills; list programs/software and check level of expertise:

| Program/Software | Proficient | Good | Novice |
|------------------|------------|------|--------|
|                  |            |      |        |
|                  |            |      |        |
|                  |            |      |        |

If you need additional space, please continue on a separate sheet of paper and attach to application.

**Applicant's Statement**

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

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not, and is not intended to be, a contract of employment. I consent to undergo a physical exam, which may include drug testing, as may be necessary prior to any employment decision.

In the event of employment, I understand that false or misleading information given in my application or the interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the Company.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

| For Personnel Department Use Only |                              |                             |                          |
|-----------------------------------|------------------------------|-----------------------------|--------------------------|
| Schedule Interview                | <input type="checkbox"/> yes | <input type="checkbox"/> no |                          |
| Remarks _____                     |                              |                             |                          |
| _____                             |                              |                             |                          |
|                                   |                              |                             | Date                     |
| Employed                          | <input type="checkbox"/> yes | <input type="checkbox"/> no | Date of Employment _____ |
| Job Title _____                   | Hourly Salary Rate _____     |                             |                          |
| By _____                          |                              |                             | Date                     |
| Name and Title                    |                              |                             |                          |