



EMPLOYMENT APPLICATION

Personnel Office Use Only

1078 Dogwood Road, Suite 103
 Heber, CA 92249
 (760) 482-2440 phone
 www.heber.ca.gov

**Heber Public Utility District is
 An Equal Opportunity Employer**

Type, or complete in ink (blue or black). Incomplete or illegible applications may not be accepted or considered.

Position Applied For: _____

Applicant's Name: (Last, First, Middle) _____

Address: _____ (Number and Street) _____ (City & State) _____ (Zip)

Contact Phones: Work () _____ Home () _____ Cellular () _____

Email Address: _____

Do you have a valid CA driver's license? YES NO Number: _____ Class: _____
Complete only if job related.

Have you ever been employed by HPUD? If yes, state position and date of employment:	YES	NO
Have you ever been fired or forced to resign from a position?	YES	NO
Do you have the legal right to work in the United States? <i>Prior to appointment, the candidate must submit proof of eligibility to work in the United States.</i>	YES	NO
Can you perform any or all job functions of the position for which you are applying, either with or without reasonable accommodations?	YES	NO
What alternate shift are you able to work? (Please check all that apply) Full Time Part Time Weekends Overtime		
List any relatives (and their relationship to you) or friends working for HPUD. Note that an employed relative does not exclude application from being considered, however, District policy does not permit supervision between relatives.		

EDUCATION

	NAME AND LOCATION OF SCHOOL	COURSE OF STUDY	DID YOU GRADUATE?	DEGREE OR DIPLOMA
High School			YES NO	
College or University			YES NO	
Vocational or Business			YES NO	
Graduate School			YES NO	

EMPLOYMENT HISTORY

BEGINNING WITH YOUR MOST RECENT EMPLOYMENT FIRST, LIST ALL EMPLOYMENT OVER THE LAST 10 YEARS BELOW. INCLUDE ALL INFORMATION REQUESTED. RESUMES MAY BE ATTACHED FOR ADDITIONAL INFORMATION, BUT **WILL NOT** BE ACCEPTED IN LIEU OF A COMPLETED DISTRICT APPLICATION.

From: To:	Name of Employer:		
Position Title:	Address:		
Immediate Supervisor and Title:	Telephone Number ()		
	May we contact? Yes No		
Description of Duties: (Include separate pages or reference resume if necessary)			Reason for leaving:

From: To:	Name of Employer:		
Position:	Address:		
Immediate Supervisor and Title:	Telephone Number ()		
	May we contact? Yes No		
Description of Duties:			Reason for leaving:

From: To:	Name of Employer:		
Position:	Address:		
Immediate Supervisor and Title:	Telephone Number ()		
	May we contact? Yes No		
Description of Duties:			Reason for leaving:

From: To:	Name of Employer:	
Position:	Address:	
Immediate Supervisor and Title:	Telephone Number ()	
	May we contact? Yes No	
Description of Duties:		Reason for leaving:

SKILLS AND QUALIFICATIONS

List any licenses or certifications of professional or vocational competence you possess that relate to the position applied.		
DESCRIPTION	CERTIFICATE NUMBER	EXPIRATION

List any memberships in professional or civic organizations (exclude those which may disclose your race, religion, or national origin)

List any other special skills or abilities, including fluency in a foreign language

APPLICANT CERTIFICATION

<p>I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for discharge if I am employed, regardless of the time elapsed before discovery.</p> <p>I understand that nothing contained in the application or conveyed during any interview which may be granted is intended to create an employment contract between me and the district. In addition, I understand and agree that if I am employed, pursuant to law, that no promises or representations contrary to the foregoing are binding on the district unless made in writing and signed by me and the district designated representative.</p> <p>All qualified applicants will receive consideration for employment for employment without regard to race, color, sex, age, national origin, religion, sexual preference, disability, ancestry, genetic information, medical condition or gender identity.</p>	
APPLICANT'S SIGNATURE	DATE
<p><i>In the event the District provides the applicant with an offer of employment, such offer is contingent upon applicant passing a pre-employment physical examination, which may include a screening test for illegal drug use and/or an assessment of safe work capacity relating to the essential job functions for the position applied.</i></p>	