



3707 Old Hwy 395 Fallbrook, CA 92028-2500
 Phone: (760) 728-1178 Fax: (760) 728-1060
 www.rainbowmwd.com

Application for Employment

Applicants will be considered for employment at Rainbow Municipal Water District without regard to race, color, religion, sex, national origin, age, sexual orientation, ancestry, martial or veteran status, mental or physical disability or any other legally protected status.

Applications must be receive in the Human Resources office by 4:00 p.m. on the announced final date. Postmarks will not be accepted. Faxed applications and photocopies of the application will not be accepted. Unsolicited applications will not be accepted. Applications must be filled out completely. Please print clearly in blue or black ink or type. Resumes may be attached, but will not be accepted in lieu of a completed District application unless otherwise specified. If more space is needed, attach additional sheets.

Position Applied For (Give exact title)	Date of Application
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(PLEASE PRINT)

Last Name	First Name	Middle Initial
Address	Number	Street
		City
		State
		Zip
Telephone Number(s)	Day	Evening
		Messages

Are you over 18 years of age? Yes No If under 18, you must submit a work permit.

Have you ever filed an application with us before? Yes No If "YES", when? _____

Have you ever been employed with us before? Yes No If "YES", when? _____

Are you currently employed? Yes No May we contact your present employer? Yes No

Can you, after employment, submit proof of your legal right to work in the U.S.? Yes No

On what date would you be available for work? _____

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

Are you currently on "lay-off" status and subject to recall? Yes No

Can you travel if a job requires it? Yes No

Have you ever been convicted of a crime(s), either felony or misdemeanor, regardless of whether the conviction(s) resulted in a sentence, suspended sentence, probation or other resolution following a plea of guilty or no contest, a verdict, or other finding of guilt? Yes No *(In responding to this question, do not include: arrests that did not lead to a conviction; convictions for marijuana-related offenses or for the possession of drug paraphernalia more than two years old; or any participation in or referral to any pre-trial or post-trial diversion program.)* If you response is "Yes" please explain the circumstances of the conviction below. A response of "Yes" will not result in your automatic disqualification from employment.

If Yes, please explain: _____

Do you possess a valid California Driver's License? Yes No Circle Class:: A B C

I understand that my employment with the District may depend upon insurability, that my driving record will be checked with the Department of Motor Vehicles and, if unacceptable to the District's liability carrier, I would not be eligible for hire. Maintaining a valid California driver's license during employment is required for most District positions. **I also understand, after hire, if my driving record becomes unacceptable to the District's liability carrier, I shall be subject to reclassification or termination.**

- WE ARE AN EQUAL OPPORTUNITY EMPLOYER -

Employment Experience

List all employment experience in the last 10 years. *Begin with your most recent employer.* Include military service assignments and volunteer activities, which relate to the job for which you are applying.

1.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for leaving or desiring to leave:					
2.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for leaving or desiring to leave:					
3.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for leaving or desiring to leave:::					
4.	Employer		Dates Employed		Work Performed
			From	To	
	Address				
	Telephone Number(s)		Hourly Rate/Salary		
			Starting	Final	
Job Title		Supervisor			
Reason for leaving or desiring to leave:					

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Education

High School	City / State	Circle Highest Grade Completed											Did you graduate?			
		1	2	3	4	5	6	7	8	9	10	11	12	GED	<input type="checkbox"/> Yes	<input type="checkbox"/> No
College, Business or Trade School	City / State	Attendance Dates		Degree Year	Major	Semester units										
		From	To		Subject	completed										
List other certificates or licenses and special training related to the position you are seeking. (Language, office equipment, machine operations, water distribution/water treatment, typing speed, etc.)																

*Education beyond the requirements on the job description or not related to the job for which you are applying need not be listed.

Indicate any languages, other than English, that you can speak, read and/or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List professional, trade, business or civic activities and offices held.
You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, or handicap or other protected status:

References

Give name, address and telephone number of three references who are not related to you.

	Name	Address	Telephone Number
1.			
2.			

3.			

Have you ever had any training in the United States military that is related to the job for which you are applying? Yes No

If Yes, please describe: _____

Can you perform the essential functions of the job for which you are applying, as described in the applicable job description provided with this application, with or without reasonable accommodations?

Yes No

(If accommodation is necessary, please describe below)

Applicant's Statement

I certify that 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 misrepresentation or omission of facts called for hereon will be sufficient cause for cancellation of consideration for employment or dismissal from the District service if I have been employed.

I understand that employment with the District is for an indefinite and unspecified duration and that employment with the District is at the mutual consent of the employee and the District and can be terminated at will, at any time, by the employee or the District and that this employment relationship may not be changed by any written document or by conduct, unless such change is specifically acknowledged in writing by an authorized executive of the RMWD.

I understand that offers of employment are contingent upon successful completion of a District-paid physical examination to see if the applicant is fit to perform the essential functions of the job. All job applicants who are selected to fill a position must, as part of that physical examination, submit to and pass a drug screening test.

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

Signature of Applicant: _____ Date: _____