

Employment offers are made on the basis of qualifications and without regard to race, sex, religion, national or ethnic origin, disability, age, veteran status, or sexual orientation.

PLEASE COMPLETE ENTIRE APPLICATION

Name (Last, First, Middle):			Employment Desired:
			□Full Time □Part Time
Street Address:	City, State & Zip:		□Temporary □Seasonal
Social Security Number:	Home Phone:	Cell Phone:	Desired Salary:
Are you eligible to work in the United States?	□Yes □ No	Position applying for:	
Are you 18 years of age or older?	□Yes □No		
Are you currently employed?	□Yes □No	Can we contact your current employ	ver? □Yes □No
Have you ever been convicted of a felony?	□Yes □No	Have you ever filed an application h	ere before? □Yes □No
Are you related to any current Company employee?	□Yes □No	If YES, their name & their relationship to you?	
Do you have a valid driver's license?	□Yes □No	If YES, State of issuance, license #, a	nd expiration date:
Referral Source? Check all that apply: □Newspaper Advertisement □Walk-in/Website □ Referral by Employee/Friend			

EDUCATION

Name of School	City/State	Did you graduate?	Diploma	Course	Degree received	Major
High School:		Yes No				
GED:		Yes No				
Other School:		Yes No				
College or University:		Yes No				
Graduate School:		Yes No				

SKILLS: Please list technical skills, clerical skills, trade skills, etc., relevant to this position. Include relevant computer systems and software packages of which you have a working knowledge.

WORK EXPERIENCE - Please detail work history. Begin with your <u>current</u> or most recent employer. <u>Attach additional sheets if necessary</u>. Include full-time military or volunteer commitments.

Dates Employed From:To:	Title:	
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone #		Other Reference Name, Title and Phone #:
Primary duties:		Reason for Leaving:

Dates Employed From:To:	Title:	
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone #		Other Reference Name, Title and Phone #:
Primary duties:		Reason for Leaving:

Dates Employed From: To:	Title:	
Starting Salary:	Organization Name and Address:	
Final Salary:		
Supervisor's Name, Title and Phone #		Other Reference Name, Title and Phone #:
Primary duties:		Reason for Leaving:

PLEASE READ CAREFULLY AND SIGN THAT YOU UNDERSTAND AND ACCEPT THIS INFORMATION.

I affirm that this application for employment and any additional documentation contain no misrepresentations or falsifications and that the information is true and complete to the best of my knowledge and belief. I am aware, that should investigation at any time disclose and such misrepresentation or falsification I will be disqualifies from further consideration or, if employed by Mountain Regional Water, I may be terminated from employment.

I understand that Mountain Regional Water is a drug free workplace conducting pre-employment, reasonable suspicion, post-accident and follow up drug testing for the illegal use of controlled substances. If the position for which I am applying for is considered safety sensitive, I understand that I am subject to random drug testing.

Applicant Signature:		Date:	
Please return completed form to:	Mountain Regional Water Special Service District Attn: Human Resources Department P.O. BOX 982320, Park City, Utah 84098 Telephone 435.940.1916 Fax 435.940.1945		