



Sweetwater Authority
Post Office Box 2328
Chula Vista, CA 91912-2328

APPLICATION FOR EMPLOYMENT

The employment application is one of the most important screening and selection tools used by Sweetwater Authority. It is used at all points of the hiring process, and is the applicant's primary method of illustrating his/her qualifications. Applications must be filled out completely and clearly show that the minimum qualifications are met. False statements, as well as failure to disclose requested information, will be cause for disqualification, removal from an eligibility list, or discharge from employment. Resumes may be attached, but will not be accepted in lieu of a complete SWA application form. If more space is needed, attach additional sheets. Please print clearly in ink, or type.

Desired position				Date of Application	
How did you learn about us? <input type="checkbox"/> Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Walk-In <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> Other (Please explain)					
Name (Last)		(First)	(Middle)	Are you under the age of 18? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Address (Street)		(City)	(State)	(Zip)	Phone (hm) (wk)
If hired, can you provide proof of your legal right to work in the US?				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Specific desired position				Date Available	

Are you available to work full time? <input type="checkbox"/> Yes <input type="checkbox"/> No Part Time? <input type="checkbox"/> Yes <input type="checkbox"/> No (If so, what hours?)	
Have you ever filed an application to work with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, give date and position:	
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No May we contact your current employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you have any relatives currently employed by SWA? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If so, this does not exclude you from employment. It is used to prevent placement which may create conflicts of interest).</i> If yes, name of employee: Relationship:	
Have you ever been convicted of a criminal offense? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Convictions include a plea of guilty, nolo contendere (no contest) and/or a finding of guilty by a judge or jury regardless of whether a sentence is imposed by the court. You may exclude convictions that have been sealed, expunged, legally eradicated, or convictions for minor traffic offenses or marijuana related offences exempted by the California Labor Code that are more than two years old). (Conviction of a crime does not necessarily mean you will not be considered for the position).</i> If yes, list date of conviction and conditions:	
Have you ever been discharged or forced to resign from any position? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, describe conditions:	

EDUCATION

	High School	Undergraduate College/University	Graduate Professional
School Name, Location and Phone Number			
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4
Check all that apply	<input type="checkbox"/> Diploma <input type="checkbox"/> GED	<input type="checkbox"/> AA <input type="checkbox"/> AS <input type="checkbox"/> BA <input type="checkbox"/> BS	<input type="checkbox"/> MA <input type="checkbox"/> MS
Degree Earned			
Describe any specialized training, apprenticeship skills, diplomas, certificates, and extra curricular activities			
Describe any honors you have received			
State any additional information you feel may be helpful to us in considering your application			
Indicate any languages, other than English, that you speak, read and/or write.			
	FLUENT	GOOD	FAIR
SPEAK			
READ			
WRITE			

List other licenses and special training, skills, business machines you operate, etc. Related to the position you are seeking (include typing speed, shorthand speed, facility with word processors, calculators, etc.)

REFERENCES

	Name	Address	Telephone Number
1			
2			
3			

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodations? Yes No If no, describe the functions that cannot be performed:

EMPLOYMENT EXPERIENCE

Start with your present or last job and describe your total job history. Use additional pages as required. Include military service assignments and volunteer activities which relate to the job for which you are applying. You may exclude organizations which indicate race, color, religion, gender, national origin, mental or physical disability or other protected status.

1 Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers			
Address	Hourly Rate/Salary		
	Start	Final	
Job Title	Supervisor		
Reason for Leaving			

2 Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers			
Address	Hourly Rate/Salary		
	Start	Final	
Job Title	Supervisor		
Reason for Leaving			

3 Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers			
Address	Hourly Rate/Salary		
	Start	Final	
Job Title	Supervisor		
Reason for Leaving			

4 Employer	Dates Employed		Work Performed
	From	To	
Telephone Numbers			
Address	Hourly Rate/Salary		
	Start	Final	
Job Title	Supervisor		
Reason for Leaving			

Summarize prior relevant experience and fill in periods of unemployment or periods not accounted for above. Include any additional information that you want us to know about you that will help us in evaluating your qualifications. Use a separate sheet of paper if you need more space.

Which of all your assets (background, education, experience, etc.) do you feel would be most valuable in any association you may make with us?

Have you set a goal for yourself which you want to reach in the next five years? Summarize briefly:

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

Each employee is required to take a pre-employment physical examination after receiving an offer of employment and before beginning his/her first day of employment. Every offer of employment is contingent upon an employee's successful completion of the physical examination. Additionally, the Authority is committed to providing a safe, efficient and productive place of employment. To achieve this objective, the Authority desires to prevent drug or alcohol use from adversely affecting the work place. Accordingly, any applicants who receive offers of employment must, as a part of their physical examination and subject to any applicable legal requirements, successfully complete a pre-employment drug and alcohol screening exam before they may begin work. Such physical examination, including the drug and alcohol screening exam, will be performed at the Authority's expense. All offers of employment are conditioned upon successful completion of these examinations.

VERIFICATIONS OF STATUS

The Authority is required by federal immigration laws to verify the individual's identity and legal ability to work before he/she can be hired. In keeping with this obligation, documentation that shows each person's identification and legal authority to work must be inspected. Each applicant must also attest to his/her legal authority to work and to his/her identification on an I-9 Form provided by the federal government. This verification must be completed as soon as possible after an offer of employment is made and in no event more than three business days after an individual is hired. All offers of employment and continued employment for positions in the United States are conditioned on furnishing satisfactory evidence of identification and legal authority to work in the United States.

I certify the information contained in this application is true and correct to the best of my knowledge. I authorize the investigation of all statements contained in this application, including information from former employers.

Signature

Date

Sweetwater Authority is an equal opportunity employer, which does not discriminate on the basis of race, color, ancestry, national origin, religion, age, sex, marital status, physical disability, pregnancy, sexual orientation or medical conditions.

PLEASE FILL OUT **COMPLETELY** AND RETURN THIS WITH YOUR APPLICATION.

Name

Date

Position Applied For

Dear Applicant:

Thank you for your interest in employment with Sweetwater Authority. We regret that we cannot respond to you more personally about your application. However, we want you to know that your application did/will receive an individual, personal review as part of the evaluation process. We hope the information below is helpful.

STATUS OF APPLICATION:	FOR OFFICE USE ONLY
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- We have received your completed application form and will be completing the screening process in the near future. You will be notified of the status of your application no later than _____.
- The position you applied for has been filled with a candidate who most closely met the requirements of the position.
- Due to the volume of applications received, we have selected for further consideration only those candidates whose qualifications more closely meet our job requirements.

Remarks:

**THANK YOU FOR YOUR INTEREST IN EMPLOYMENT WITH SWEETWATER AUTHORITY
AN EQUAL OPPORTUNITY EMPLOYER**

Print your Name and Mailing Address Clearly in the Box Below: