

Cotton County RWD#2

229 N. Broadway Walters, OK 73572 Phone: 580-875-2027

Employment Application

Applicant Information									
Full Name:			Date:						
	Last		M.I.						
Address:									
	Street Address					Apartment/Unit #			
	<u></u>					7/2 0 /			
	City				State	ZIP Code			
Phone:				Email					
Date Availal	ble:		Desired Salary:						
Position Applied for: Water System Operator (Field)									
. .		YES	NO			YES	NO		
Are you a citizen of the United States?				If no, are you auth	orized to wor	k in the U.S.? □			
Have you ever worked for this company?		YES		If yes, when?					
Do you have a valid Oklahoma driver's license?			NO □						
Do you have an ODEQ water operator's license?		YES	NO □	If yes, what level?					
Are you able to lift/and or move up to 50lbs?		YES	NO □	If no, can reasonable accommodation be made?					
Have you ever been convicted of a felony?		YES	NO □						
lf yes, expla	in:								
Education									
High School: Address:									
YES NO Did you graduate? Diploma:									
College:			Addre	ss:					

Cotton County Rural Water District #2 is an equal opportunity provider and employer.

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866)632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at <u>-program.intake@usda.gov-</u>

Did you graduate?	YES	NO □	Degree:						
Other: Address:									
Did you graduate?	YES		Degree:						
References									
Please list three professional references.									
Full Name:							Relationship:		
Company:							Phone:		
Address:									
Full Name:							Relationship:		
Company:							Phone:		
Address:									
Full Name:							Relationship:		
Company:							Phone:		
Address:									
			Pı	revious En	nployme	nt			
Company:							Phone:		
Address:									
Job Title:	Starting Salary:					Ending Salary: \$			
Responsibilities:									
From:	To: Reason for Leaving:								
May we contact your previous supervisor for a reference?									
Company:							Phone:		
Address:							Supervisor:		
Job Title:	Starting Salary: <u>\$</u>					Ending Salary: \$			
Responsibilities:									
From: To: Reason for Leaving:									

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YES	NC

Company:				Phone:				
Address:				Supervisor:				
Job Title:	Starting S	Ending Salary: <u>\$</u>						
Responsibilit	ies:							
From:	То:	Reason	for Leaving:					
May we cont	act your previous supervisor for a reference?	YES						
Military Service								
Branch:			From:	То:_				
Disclaimer and Signature								

I certify that my answers are true and complete to the best of my knowledge. I understand that this application is not a binding contract for employment.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. I further understand that my employment will be at will and can be terminated by either party at anytime.

Date:

Signature:

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