



Have you ever applied for work at Clow and not been hired?  Yes  No

If yes, when? \_\_\_\_\_

Have you worked for Clow Water Systems Company in the past?  Yes  No

If yes, position, dates of employment, and reason for leaving?

Position \_\_\_\_\_ Dates of employment \_\_\_\_\_ Reason for leaving \_\_\_\_\_

If you are under 18 years of age, can you provide proof of your eligibility to work?  Yes  No

Are you currently employed?  Yes  No

Date you are available to start \_\_\_\_\_

Can we contact your present employer?  Yes  No

Are you prevented from legally being employed in this country?  Yes  No

*Proof of citizenship or immigration status will be required upon employment*

Are you available to work:  Full-time (please circle shifts you can work **1 2 3**)  
 Part-time (please circle times you can work **Mornings Afternoons Evenings**)  
 Temporary (please indicate dates available \_\_\_\_\_ to \_\_\_\_\_)

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

Have you ever been fired from an employer due to poor performance, negligence, or other fault of your own?  Yes  No

Have you ever been convicted of a criminal offense?  Yes  No

Education			
	Name and Address of School	Course of Study	Years Completed/Diploma
High School/ Vocational			
College			
Other			

References		
Name	Relationship	Phone

Clow Water System Company is an Equal Opportunity Employer.

## Employment Experience

Please begin with your current or last employer. Excluding any organizations that may indicate race, color, gender, disabilities, or other protected status, please list any job-related experiences, military assignments and/or volunteer activities.

<b>Employer</b>	<b>Dates Employed From - To</b>	<b>Work Peformed</b>
<b>Address</b>		
<b>Telephone</b>	<b>Hourly Rate/Salary</b>	
<b>Job Title</b>		
<b>Supervisor</b>		
<b>Reason for Leaving</b>		
_____		

<b>Employer</b>	<b>Dates Employed From - To</b>	<b>Work Peformed</b>
<b>Address</b>		
<b>Telephone</b>	<b>Hourly Rate/Salary</b>	
<b>Job Title</b>		
<b>Supervisor</b>		
<b>Reason for Leaving</b>		
_____		

<b>Employer</b>	<b>Dates Employed From - To</b>	<b>Work Peformed</b>
<b>Address</b>		
<b>Telephone</b>	<b>Hourly Rate/Salary</b>	
<b>Job Title</b>		
<b>Supervisor</b>		
<b>Reason for Leaving</b>		
_____		

**Have you served in the U.S. Military?**    **Yes**    **No**

**If yes, years of active duty?**   From \_\_\_\_\_ To \_\_\_\_\_

Branch \_\_\_\_\_ Primary Duties \_\_\_\_\_

Date of Separation \_\_\_\_\_ Primary Duties \_\_\_\_\_

Reserve of National Guard Status:    **Active**    **Inactive**

## Additional Information

**Other Qualifications-** Job related skills, training, qualifications and experience.

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**Any additional information you feel may be helpful to us in considering your application.**

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**This application is submitted to Clow Water Systems Company with full knowledge, understanding and consent by me to the following:**

- 1) I agree, if employed, to abide by all rules and regulations of Clow Water Systems Company.
- 2) If employed, in the event I should lose or destroy through negligence or misuse, equipment furnished to me by the Company, I authorize the Company to deduct from my wages an amount necessary to replace the equipment or damage caused by my actions.
- 3) I understand I am required to abide by all rules and regulations at Clow Water Systems Company.
- 4) I understand that an incompletely filled out application or an unsigned application may not be considered.
- 5) I authorize investigation of all statements contained in this application, of which statements I certify to be true. I understand that any false or misleading statements or omissions of information may be cause for rejection of my application and/or if employed, may be cause for subsequent dismissal.
- 6) I authorize all my former employers to answer fully any and all questions that may be asked of them by Clow Water Systems Company concerning my employment with them and herewith hold such former employers harmless for giving any and all information within their knowledge or records. A photocopy of this signed authorization shall have the same effect as the original.
- 7) I authorize Clow Water Systems Company to complete a background check for purposes of employment.
- 8) If hired by Clow Water Systems Company, I agree any and all litigation against the Clow Water Systems in which I am named either separately or jointly, must be filed within 6 months of my last day of employment.

Applicant's Signature \_\_\_\_\_  
(Must be signed)

Date \_\_\_\_\_

## FOR HR DEPARTMENT USE ONLY

Position(s) applied for is open  Yes  No

Position(s) considered for: \_\_\_\_\_  
\_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
HR Rep.

\_\_\_\_\_  
Date

AC	<input type="checkbox"/>	Intv. Sch.	<input type="checkbox"/>	HA Sch.	<input type="checkbox"/>	BG <input checked="" type="checkbox"/>	<input type="checkbox"/>	REF.	<input type="checkbox"/>	HA Results	<input type="checkbox"/>	Orient.	<input type="checkbox"/>
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