

WATER AND SEWER RISK MANAGEMENT POOL
1750 112th Ave NE, B215
BELLEVUE, WA 98004
425-452-9750
425-452-9740 FAX
carye@wsrmp.org

APPLICATION FOR EMPLOYMENT – AN EQUAL OPPORTUNITY EMPLOYER

The Water and Sewer Risk Management Pool maintains a policy of the treating of all employees and applicants for employment without regard to race, color, creed, religion, national origin, gender, age, disability, marital status, veteran status, sexual orientation or affectional preference, citizenship or any other characteristic protected by law in all employment decisions, including but not limited to recruitment, hiring, compensation, training, apprenticeship, promotion, upgrading, demotion, downgrading, transfer, lay-off, termination and all other terms and conditions of employment.

Last Name:	First:	Middle:
<hr/>		
Social Security Number:	Email:	
<hr/>		
Street Address:		
<hr/>		
City:	State:	Zip Code:
<hr/>		
Telephone:	How long have you lived here?	
<hr/>		

Please list addresses for last 10 years:
1. <hr/>
2. <hr/>
3. <hr/>
4. <hr/>

Languages Spoken Fluently (if relevant to the position for which you are applying):
1. <hr/> 2. <hr/> 3. <hr/>

Position Applying For: <hr/> Date Available: <hr/>
Are you presently employed? Yes <hr/> No <hr/>
If yes, may we contact your present employer? Yes <hr/> No <hr/>

How did you hear of the job opening for which you are applying: <hr/> <hr/>

Do you have any relative(s), or persons with whom you are involved in a close personal relationship, employed by the Water and Sewer Risk Management Pool? If so, list:
Name <hr/> Relationship) <hr/>

Were you ever previously employed by the Water and Sewer Risk Management Pool? Yes ___ No ___
 From When: _____ To: _____

Do you currently have unrestricted work authorization allowing you to accept employment in the United States?
 Yes _____ No _____

In the event of an emergency, whom may we contact?
 Name: _____ Telephone: _____
 Name: _____ Telephone: _____

Are you willing to work evenings? Yes _____ No _____
 Are you willing to work Weekends? Yes _____ No _____

Are you 18 years or older? Yes _____ No _____

Can you, with or without reasonable accommodation, perform the essential functions of the position in which you are interested?
 Yes _____ No _____

Have you ever been convicted of a violation of any law or ordinance other than a traffic violation (juvenile delinquency, youthful offender and wayward minor excluded)? No _____ Yes _____
 If yes, please explain _____

PLEASE NOTE: A CONVICTION RECORD WILL NOT NECESSARILY BE A BAR TO EMPLOYMENT

EDUCATIONAL BACKGROUND

Level	Name and Address of School	Course of Study	Years Attended	Circle last Year Completed	Did you Graduate?	List Diploma or Degree
High School						
Technical or Business				1 2 3 4		
College				1 2 3 4		
Graduate				1 2 3 4		

If you have any additional educational, vocational and/or professional information, such as special areas of research or study, training, seminars, etc., please attach such information that is relevant to your application here. If familiarity with a foreign language is listed on the job description, please describe your foreign language skills here. _____

Professional memberships, certificates or licenses held. (Exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, physical or mental disability or labor organization affiliations). Supplement this information by written attachment if applicable. _____

Please list any paid or volunteer experience in your community. _____

EMPLOYMENT HISTORY (START WITH PRESENT AND ATTACH ADDITIONAL SHEETS (IF NECESSARY))

Name			Describe Duties Performed:		
Address:			Title:		
Type of Business Number		Phone	Starting Salary: Final Salary:		
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact?	Reason for Leaving?

Name			Describe Duties Performed:		
Address:			Title:		
Type of Business Number		Phone	Starting Salary: Final Salary:		
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact?	Reason for Leaving?

Name		Describe Duties Performed:		
Address:		Title:		
Type of Business Number	Phone	Starting Salary: Final Salary:		
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact? Reason for Leaving?

Name		Describe Duties Performed:		
Address:		Title:		
Type of Business Number	Phone	Starting Salary: Final Salary:		
Employed (Mo./Yr.)	From	To (Mo./Yr.)	Supervisor	May we contact? Reason for Leaving?

MILITARY RECORD				
Were you in the U.S. Armed Forces? No _____ Yes _____ Branch: _____				
From: _____ To: _____				
List duties in service, including special training: _____				

I certify that all the information submitted by me on this application is true and complete, and I understand that any false information or omissions will lead to rejection of my application or, if I am employed, discipline up to and including termination at the time such false information or omissions are discovered.

My signature below certifies that I understand that if I am extended an offer of employment by the Water and Sewer Risk Management Pool, my employment is contingent upon satisfactory completion of a medical examination (if applicable to the position for which you are applying), including a drug test (if applicable to the position for which you are applying), and submission of proof that I have the credentials and/or licenses (if relevant) necessary for the position that I am offered.

I understand that this application is only valid for the position applied for at present and that the Water and Sewer Risk Management Pool is not obligated to retain or consider this application for future openings.

Applicant Signature: _____ **Date of Application:** _____

BACKGROUND INVESTIGATION

I authorize investigation of all statements contained in this application, authorize the Water and Sewer Risk Management Pool to secure information about my background and experience with former employers, education institutions and any relevant agencies, and authorize those parties to provide information to the Water and Sewer Risk Management Pool concerning my background and experience. I release the Water and Sewer Risk Management Pool, and all parties providing information to the Pool about my background and experience, from any liability whatsoever arising therefrom.

Applicant Signature: _____ **Date:** _____