

# Winchester Utilities

## APPLICATION FOR EMPLOYMENT

WINCHESTER UTILITIES IS AN EQUAL OPPORTUNITY EMPLOYER DEDICATED TO NON-DISCRIMINATION IN EMPLOYMENT. WINCHESTER UTILITIES SELECTS THE BEST QUALIFIED INDIVIDUAL FOR THE JOB BASED ON JOB-RELATED QUALIFICATIONS REGARDLESS OF RACE, AGE (40+), COLOR, RELIGION, SEX, NATIONAL ORIGIN, MARITAL STATUS, SEXUAL PREFERENCE, DISABILITY OR ANY OTHER STATUS PROTECTED BY APPLICABLE LAW.

Today's Date: \_\_\_\_\_

\_\_\_\_\_  
First Name                      Middle Initial                      Last Name

Present Address: \_\_\_\_\_

Permanent Address (if other than Present): \_\_\_\_\_

Home Phone \_\_\_\_\_ Other Phone \_\_\_\_\_  
(Area Code)                                      (Area Code)

**Check Position(s) Desired:**

- Plant Operator (Water/Sewer)
- Clerical/Administrative
- Lineman (Power)
- Driver
- Mechanic
- Laborer
- Other \_\_\_\_\_

**Employment Desired:**

- Full-Time
- Part-Time
- Seasonal

1. Have you ever been employed by Winchester Utilities? Yes \_\_\_ No \_\_\_

2. State age if you are under 18: \_\_\_\_ If you are under 18, hire is subject to verification that you are of minimum legal age to work.

3. Do you have a Driver's License? Yes \_\_\_ No \_\_\_ Driver's License #: \_\_\_\_\_

State of issue: \_\_\_\_\_ Expiration: \_\_\_\_\_

- Do you have a Commercial Driver's License? Yes \_\_\_ No \_\_\_ License#: \_\_\_\_\_  
State of issue: \_\_\_\_\_ Expiration: \_\_\_\_\_
- Have you had any accidents in the past three (3) years? Yes \_\_\_ No \_\_\_ How many? \_\_\_\_\_
- Have you had any moving violations in the past three (3) years? Yes \_\_\_ No \_\_\_ How many? \_\_\_\_\_

4. If you are hired, can you present evidence of your legal right to live and work in this country?  
Yes \_\_\_ No \_\_\_ (Proof is required by law)

5. Have you ever been convicted of a felony? Yes \_\_\_ No \_\_\_  
(If "yes," include information with this application.)

6. Have you ever been arrested, but the case is pending/unresolved? Yes \_\_\_ No \_\_\_  
Details: \_\_\_\_\_

**Note:** Conviction of a crime is not an automatic bar to employment – all circumstances will be considered.

7. Are you able to perform the essential functions of the position for which you applied? Yes \_\_\_\_\_ No \_\_\_\_\_

8. List all relatives that work at Winchester Utilities: \_\_\_\_\_

9. List education received:

	<u>City, State</u>	<u>Diploma</u>	<u>Major/ Degree</u>
<b>High School</b>	_____	_____	_____
<b>Vocational School</b>	_____	_____	_____
<b>College</b>	_____	_____	_____

10. Have you served in the United States Armed Forces? Yes \_\_\_\_\_ No \_\_\_\_\_  
Branch \_\_\_\_\_ Reserved Status \_\_\_\_\_ Special Training \_\_\_\_\_

11. List all other training received (special courses, work training programs, Armed Forces training, etc.):

\_\_\_\_\_  
\_\_\_\_\_

12. List any special qualifications and skills (licenses, skills with machines, patents, publications, etc.):

\_\_\_\_\_

13. List three people, other than relatives or former employees, who have knowledge of your character and/or abilities:

<b>Name</b>	<b>Mailing Address</b>	<b>Phone</b>	<b>Years Known</b>
_____	_____	(____) _____	_____
_____	_____	(____) _____	_____
_____	_____	(____) _____	_____

14. Please account for all employment since leaving school, or for the last ten (10) years that you have not yet stated in the above information. If you have attached a resume, you do not have to repeat any employment information except for starting and ending pay. List dates and state what you were doing.

From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe work done:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe work done:

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From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe work done:

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From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe work done:

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From: \_\_\_\_\_ To: \_\_\_\_\_ Starting Pay: \_\_\_\_\_ Ending Pay: \_\_\_\_\_

Job Title: \_\_\_\_\_ Company/Organization: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Immediate Supervisor: \_\_\_\_\_

Describe work done:

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## **POST-OFFER PHYSICAL/CONTROLLED SUBSTANCES SCREENING**

Winchester Utilities strongly believes in its responsibility to provide a safe and healthful workplace for all its employees. Any time after you are hired, Winchester Utilities may require you to submit to a physical examination to the extent permitted by law. By signing below, you are giving your consent to the disclosure of the results of the physical examinations and related tests to Winchester Utilities.

You should understand that **YOU MAY BE TESTED** for the presence of controlled substances before you are hired as a condition of employment with Winchester Utilities. If you have any questions regarding this policy, please contact the office before your final interview.

## **AGREEMENT OF APPLICANT CERTIFICATION, AUTHORIZATIONS AND UNDERSTANDING OF EMPLOYMENT RELATIONSHIP**

I hereby state that all the information that I provided on this application or any other document submitted in connection with my employment, and in any interview, are true and correct. I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand that if I am employed and any information is later found false in any respect, or if I have omitted material information, I may be dismissed. I understand that if selected for hire, it will be necessary for me to provide satisfactory evidence of my identity and legal authority to work in the United States.

I understand an offer of employment may be made contingent on passing a job-related physical examination. I agree to submit to a controlled substances screening and physical examination by Winchester Utilities' designated physical therapist and/or other medical practitioner. I have read, understand, and agree to the above-referenced physical examination/drug testing policy, and disclosure of information.

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**REQUEST, AUTHORIZATION, CONSENT AND RELEASE  
FOR BACKGROUND INFORMATION**

PLEASE TYPE OR PRINT

I, \_\_\_\_\_  
First Name Middle Name Last Name (Please include Jr. Sr. II, III etc.)

understand that in conjunction with my application for employment with Winchester Utilities, that the Company may use the services of an outside agency to research and verify the information I have provided on my resume and/or application for employment including my personal background, character, professional standing, work history and qualifications. I also understand that Winchester Utilities or other outside agency will utilize various sources of information they deem appropriate, including but not limited to: Department of Motor Vehicle records, credit reporting agencies, criminal and civil court conviction records, current and former employers, government regulatory agencies, local, state or federal licensing boards or commissions, public or private associations, school records, military records, and professional and personal references.

I hereby grant Winchester Utilities or an outside agency permission to access any and all applicable sources of information, including, but not limited to those listed above and unconditionally release and hold harmless Winchester Utilities and any named or unnamed corporation, company, custodian of records or informant from any and all liability resulting from furnishing information about me.

\_\_\_\_\_  
Signature Today's Date

\_\_\_\_\_  
Position Applied For Department (Power, Water, or Sewer)

\_\_\_\_\_  
Driver's License # State

Other names you have used or are also known as: \_\_\_\_\_