

# GOFORTH SPECIAL UTILITY DISTRICT

512-376-5695

8900 Niederwald Strasse . Niederwald, TX 78640

## APPLICATION FOR EMPLOYMENT

(PLEASE PRINT CLEARLY)

*The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion or national origin. Public Law 90-202 prohibits discrimination because of age. The laws of some states prohibits some or all of the above mentioned types of discrimination.*

Date: \_\_\_\_\_

### PERSONAL

Name: \_\_\_\_\_ Social Security No. \_\_\_\_\_  
Last First Middle Initial License No. \_\_\_\_\_  
(Type Class A With Airbrake Endorsement)

Present Address: \_\_\_\_\_  
No. Street City State Zip

How many years have you lived at this address? \_\_\_\_\_ Telephone No. ( ) \_\_\_\_\_  
Cell ( ) \_\_\_\_\_

Job(s) applied for 1. \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per \_\_\_\_\_  
2. \_\_\_\_\_ Rate of pay expected \$ \_\_\_\_\_ per \_\_\_\_\_

How did you learn of this opening? \_\_\_\_\_

Do you want to work  Full-Time or  Part-Time. Specify days and hours if part-time \_\_\_\_\_

Have you worked for us before? \_\_\_\_\_ If yes, when? \_\_\_\_\_

List any friends or relatives working for us \_\_\_\_\_

If hired, on what date will you be available to start work? \_\_\_\_\_

Are there any other experiences, skills, or qualifications which you feel would especially fit you for work with the Company?  
\_\_\_\_\_  
\_\_\_\_\_

If hired, do you have a reliable means of transportation to get to work? \_\_\_\_\_

Do you have any physical handicaps which would prevent you from performing specific kinds of work? \_\_\_\_\_ If yes, describe the defect(s) and explain the work limitations. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you had a serious illness in the past 5 years?  No  Yes (describe) \_\_\_\_\_

Have you ever received compensation for injuries?  No  Yes (explain) \_\_\_\_\_

Have you ever been convicted of a crime, excluding misdemeanors and summary offenses?  No  Yes

If yes, describe in full \_\_\_\_\_  
\_\_\_\_\_

Must be able to provide 3 year driving and Criminal Record. (Available at DPS)

**Person to be notified in case of accident or emergency**

Name \_\_\_\_\_ Phone Number \_\_\_\_\_  
Address \_\_\_\_\_

**EDUCATIONAL BACKGROUND**

TYPE OF SCHOOL	NAME and ADDRESS	How Many Years Attended	Graduated	Course/Major
GRAMMAR or GRADE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
HIGH SCHOOL			<input type="checkbox"/> Yes <input type="checkbox"/> No	
COLLEGE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
POST GRADUATE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
BUSINESS or TRADE			<input type="checkbox"/> Yes <input type="checkbox"/> No	
OTHER			<input type="checkbox"/> Yes <input type="checkbox"/> No	

**MILITARY SERVICE RECORD**

Have you ever served in the armed forces?  Yes  No If yes, what branch? \_\_\_\_\_

Dates of duty: From \_\_\_\_\_ To \_\_\_\_\_ Rank at discharge \_\_\_\_\_  
Month Day Year Month Day Year

What were your duties in the Service (include special training and duty station)? \_\_\_\_\_

Have you had any schooling under the G.I. Bill of Rights? If yes, describe \_\_\_\_\_

**PERSONAL REFERENCES**

(Excluding Former Employers or Relatives)

Name and Occupation	Address	Phone Number
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**PRIOR WORK HISTORY (LIST IN ORDER, LAST OR PRESENT EMPLOYER FIRST)**

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
		_____				

Describe in detail the work you did.

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
		_____				

Describe in detail the work you did.

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
		_____				

Describe in detail the work you did.

DATES		NAME AND ADDRESS OF EMPLOYER	RATE OF PAY		SUPERVISOR'S NAME AND TITLE	REASON FOR LEAVING
FROM	TO		START	FINISH		
		_____				

Describe in detail the work you did.

May we contact the employers listed above? \_\_\_\_\_ If not, indicate which one(s) you do not wish us to contact.

Occasionally the form of an application blank makes it difficult for an individual to adequately summarize his complete background. To assist us in finding the proper position for you in our company, use the space below to summarize any additional information necessary to describe your full qualifications. Your resume may be submitted with application

Thank you for completing this application form and for your interest in employment with us. We would like to assure you that your opportunity for employment with this company will be based only on your merit and on no other consideration.

**PLEASE READ CAREFULLY**  
**APPLICANT'S CERTIFICATION AND AGREEMENT**

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge. I understand that if employed, falsified statements on this application shall be considered sufficient cause for dismissal. You are hereby authorized to make any investigation of my personal history and financial and credit record through any investigative or credit agencies or bureaus of your choice.\*

Signature of Applicant \_\_\_\_\_

\*NOTE: The Provisions of the Fair Credit Reporting Act may be applicable if a credit report on the applicant is obtained and considered.

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**DO NOT WRITE BELOW THIS LINE**

INTERVIEW  YES  NO Date \_\_\_\_\_ Hour \_\_\_\_\_

Result of Interview \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Acceptable for Employment? \_\_\_\_\_ Starting Rate \_\_\_\_\_ Starting Date \_\_\_\_\_

Occupation \_\_\_\_\_ Dept. \_\_\_\_\_

Interviewed by \_\_\_\_\_ Employed by \_\_\_\_\_  
Approved by \_\_\_\_\_