

Please return to:
Post Office Box 157
3622 Sagunto Street
Santa Ynez, CA 93460
(805) 688-6015 • Fax (805) 688-3078

Position Applied For:	

APPLICATION FOR EMPLOYMENT

INSTRUCTIONS

Please read the job bulletin to determine if you meet the requirements for the position you applied for. Print in ink or use a typewriter. Answer all questions completely and accurately. Include any additional information pertaining to your qualifications for the position. False statements are cause for rejection of the application, removal of name from eligibility list or dismissal from position. All information is subject to verification, including conviction records and former employers.

conviction records and former employers.											
CONDITION	S OF EM	PLOYMENT									
If offered employ		offer will be con submitting p	tingent on troof of lega	al right to wo	ork in U.S.	nination w	hich inclu	udes drug/alcoh	ol testing		
Name:											
		Last			First				N	Middle Initial	
Address:											
		Number			Street						
	-	City			State				Zip Code		
Phone:	1	1				river's l	_icense			,	
i fiorie.		Daytime				1110101	_1001100		ımber		State
	()			_		Evnirati	ion Date		Class	
		Evening					Lxpiiati	on Date		Class	
Are you willing to					SOCIAL	SECUR	RITY NU	JMBER:			
Part-time Yes No Temporary (hourly) Yes No Nights Yes No Weekends Yes No			Providing the Social Security account number is voluntary in accordance with the Privacy Act of 1974. If, however, the Social Security account number is not included, SYRWD, ID#1 will be unable to process your application.								
EDUCATION				onal she							
Circle highest g		•	ra adam				•	school atten	ded	Did you grad	duate?
6 7 8 9 10 11	12 13 14	15 16 Masters	PhD								
Name & location of Trade or Vocational Numl		Number Complete	-		Sem ✓	Major/Su	bjects	Degrees/C	ertificates		
ODEOLAL OL	(II. I. O.										
SPECIAL Sk		na programe	which m	ay ba ral	lated to the	type o	fampla	vmont vou a	ro sookin	va.	
List other formal training programs which may be related to the type of employment you are seeking:											
Licenses and	d Certifica	tes (State, P	rofessio	n, Trade,	etc.)						
Can you perfo Yes □ No□	rm the bas	sic functions o	f the posit	tion for wh	ich you are	applying	with or	without reaso	nable acc	ommodation?	
CERTIFICAT	TE OF AP	PLICANT:									
By signing this all best of my knowl understand that a if I am hired, my District contacts, I release all partiagents, employed in the United Stat and/or drug test.	oplication, I ledge, and a any misrepre immediate of to provide a es and perses, or repres	hereby agree a agree to have a esentation, falsi dismissal from ny and all informany and sentatives. I un	any of the fication, or employmen mation conunt all liabin derstand	information material or nt. I autho cerning my lity for any that any off	verified by to mission of information of information rize the refer- previous employs that der of employs	he Santa ormation or ences list oloyment at may rest ment is co	Ynez River this applied in this and any conditioned and and and and and and and and and an	ver Water Consoplication may restance application, as other pertinent furnishing such dupon proof of	servation D esult in my s well as al information information identity, pr	vistrict, ID #1 (the failure to received to their individual that they may here by the District toof of legal authers.	ne District). I ne an offer or, als whom the neave. Further, to or any of its nority to work
SIGNATURE:						[DATE:				

NOTE: A RESUME WILL NOT SUBSTITUE FOR THIS SECTION.

EXPERIENCE

List all periods of employment and unemployment for the last 10 years, starting with the most recent and working back. Start with present employment, including employment with SYRWCD, ID#1. Indicate any discharge or forced resignation. Please include volunteer, military or other special experience which applies to the position you are seeking.

Dates of Employment From: / / / / / / / / / / / / / / / / / / /	nt :0	Employer Name:Your Title:	
	Hours Per Week	Your Duties:	
Supervisor:			
Phone:	_		
Resignation Lay	Off		
Do not contact this	s employer 🗆	Did you receive written performance evaluations from this employer? Yes	 _ No
Dates of Employmer From: // DAY / YR t	O / / / YR	Employer Name: Your Title:	
Salary H	Hours Per Week	Your Duties:	
Supervisor:			
Phone:			
☐Resignation ☐ Lay ☐Dismissal	Off		
Do not contact this	s employer 🗆	Did you receive written performance evaluations from this employer? Yes	_ No
Dates of Employment From: / / DAY / YR t	O / / / / / / / / / / / / / / / / / / /	Employer Name: Your Title: Your Duties:	
Salary H	Hours Per Week		
Supervisor:			
Phone:			
☐Resignation ☐ Lay ☐Dismissal	Off		
Do not contact this		Did you receive written performance evaluations from this employer? Yes	_ No
Do you have any rela	atives employed l	by SYRWCD, ID#1? Yes □ No□	
If yes, individual:	Na	me Relationship	
Have you ever been	employed by SY	RWCD, ID#1? Yes □ No□	
If yes, give dates and	d positions held:		

Have you ever bee exclude misdemea expunged, or lega	anor convictions for mari	This includes a plea of guilty or juana related offenses more that sdemeanor convictions for which	non-contest which resulted in a criminal conviction. [Please in two years old; convictions that have been sealed, in probation was successfully completed or otherwise
If yes, please desc case(s):	cribe the nature of the cr	ime(s), the date and place of the	conviction(s), and the legal disposition(s) of the
factors as the natu			has been convicted of a crime. We may consider such whether the conviction is relevant to the duties of the
Are you currently o	out on bail or released fr	om custody on your own recogn	izance pending a trial? Yes □ No □
If yes, please desc case(s):	cribe the nature of the cr	ime(s) for which you were arrest	ed, the date of the arrest(s), and the status of your
Offense	Date	Place	Sentence/Fine
Offense	Date	riace	Sellencernile
Offense	Date	Place	Sentence/Fine
Offense	Date	Place	Sentence/Fine
conviction to SYR	RWCD, ID#1. If I fail t d from consideration or	o report a conviction, it will be o	ow and the date I am employed, I am obligated to report the considered a false statement or concealment of facts, and I
Complete this sect position for which traffic violation? Y convictions that	tion only if possession o you are applying. Other ′es □ No□ (Pleas have been sealed, ex	than any criminal convictions the include infractions, but excl	d in the applicable job bulletin as a requirement of the at you may have listed above, have you been convicted of a ude: any parking or equipment violations; any; and any misdemeanor offenses for which probation was judicially dismissed).
Violation	Date	Place	Sentence/Fine
Violation	Date	Place	Sentence/Fine
Violation Is there anything else	Date e you would like us to know	Place that will help us make a hiring decis	Sentence/Fine sion?

NOTICE TO APPLICANTS: All appointments shall be subject to a minimum of 12-month probationary period. The probationer may be released at any time during this period without cause or appeal.