



BYRON-BETHANY IRRIGATION DISTRICT

7995 Bruns Road | Byron, CA 94514

Tele: 209-835-0375

APPLICATION FOR EMPLOYMENT

Last Name	First	Middle	Date
Street Address			Home Phone ()
City, State, Zip			Alternate Phone ()
Have you ever applied for employment with us? Yes ____ No ____ If yes: month and year _____			E-mail
Position Desired			Pay expected
			Will you work overtime if asked? Yes____ no_____
When will you be available to begin work?			
How did you learn of our organization?			Special training or skills?

EDUCATION

SCHOOL	NAME AND LOCATION	COURSE OF STUDY	# OF YEARS COMPLETED	DID YOU GRADUATE?	DEGREE OR DIPLOMA?
College					
High School					
Elementary					
Other					

MEMBERSHIP IN PROFESSIONAL OR CIVIC ORGANIZATIONS

(Exclude those which may disclose your race, color, religion or national origin)

EMPLOYMENT HISTORY

Please give your accurate, complete full-time and part-time employment record. Start with present or most recent employer.

(1) Company Name	Telephone ()
Address	Employed (month & year) From _____ To _____
Name of Supervisor	Reason for Leaving
Job Title and Work Description	
(2) Company Name	Telephone ()
Address	Employed (month & year) From _____ To _____
Name of Supervisor	Reason for Leaving
Job Title and Work Description	
(3) Company Name	Telephone ()
Address	Employed (month & year) From _____ To _____
Name of Supervisor	Reason for Leaving
Job Title and Work Description	
(4) Company Name	Telephone ()
Address	Employed (month & year) From _____ To _____
Name of Supervisor	Reason for Leaving
Job Title and Work Description	
(5) Company Name	Telephone ()
Address	Employed (month & year) From _____ To _____
Name of Supervisor	Reason for Leaving
Job Title and Work Description	

We may contact the employers listed above unless you indicate below those you do not want us to contact.

Do Not Contact _____ Reason for request _____

DRIVING RECORD*

DRIVER LICENSES:

STATE	LICENSE NO.	TYPE	EXPIRATION DATE

DRIVING EXPERIENCE:

Class of Equipment	Type of Equipment (Van, tank, flatbed, etc.)	Dates		Total Approx. # Miles
		From	To	
Straight Truck				
Tractor & Trailer				
Bus				
Automobile				
Other				

SAFE DRIVING AWARDS YOU HOLD & FROM WHOM: _____

ACCIDENT RECORD FOR PAST 3 YEARS (attach sheet if more space is needed)

	DATES	NATURE OF ACCIDENT	WHOSE FAULT
LAST ACCIDENT			
NEXT PREVIOUS			
NEXT PREVIOUS			

TRAFFIC CONVICTIONS & FORFEITURES FOR THE PAST 3 YEARS (other than parking violations)

CITY & STATE	DATE	CHARGE	PENALTY

- A. Have you ever been denied a license, permit or privilege to operate a vehicle?
- B. Has any license, permit or privilege ever been suspended or revoked?

If the answer to either A or B is Yes, attach statement giving details.

***Attach current (within last 3 months) DMV printout with completed application.**

State names of three persons willing to provide professional and/or character references for you.

NAME	ADDRESS	PHONE NUMBER

The information requested below is needed for a legally permissible reason, including, without limitation, national security considerations, a legitimate occupational qualification or business necessity. The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex, or national origin. Federal law also prohibits discrimination on the basis of age with respect to certain individuals. The laws of most States also prohibit some or all of the above types of discrimination as well as some additional types such as discrimination based upon ancestry, marital status or physical or mental handicap or disability, genetic information, gender identity, gender expression or Military and Veteran status.

Are you over 18 years of age? Yes ___ No ___

If not, employment is subject to verification of minimum legal age.

Can you perform the essential functions of the job for which you are applying with or without reasonable accommodations? Yes ___ No ___

Byron-Bethany Irrigation District is an equal opportunity employer which does not discriminate on the basis of race, religious creed, color, national origin, ancestry, physical disability, mental disability, medical condition, genetic information, marital status, sex (sexual harassment) gender, gender identity, gender expression, age, sexual orientation, or military and veteran status.

California Government Code § 12940 et seq.

TO BE READ AND SIGNED BY APPLICANT

I understand that the information on this application will be used and that prior employers will be contacted for purposes of investigation as required by Section 391.23 of the Federal Motor Carrier Safety Regulations.

I hereby declare the information provided by me in this Application for Employment is true, correct and complete to the best of my knowledge. I understand that if employed, any misstatement or omission of fact on this application shall be considered cause for dismissal.

Further, I agree to furnish such additional job-related information and complete such job-related examinations as may be required.

I agree and understand that this application for employment in no way obligates the employer to employ me. I understand this application is not a contract and cannot create a contract.

I understand that if accepted by the District, my employment will be on a 12-month probationary basis. The introductory period will be extended by a like number of work days as a result of any leaves of absence, holiday period and other absences occurring during the probation period.

If employed by the District, I agree to abide by its rules and regulations.

I certify that this application was completed by me, and that all entries on it and information in it are true and complete as to the best of my knowledge.

Applicant's Signature

Date

PLEASE READ EACH STATEMENT BEFORE SIGNING

**ACKNOWLEDGMENT OF PRE-EMPLOYMENT PHYSICAL
INCLUDING ROUTINE DRUG SCREEN**

The undersigned is an applicant for employment with the Byron-Bethany Irrigation District. The applicant has been advised of and understands that, in connection with said application, Byron-Bethany Irrigation District requires a pre-employment physical examination, the results of which will be provided to the District in order to determine applicant's physical ability to perform the required work. Applicant further understands that, included within said pre-employment physical, is a drug screen intended to determine the presence of any substances present in applicant that are legally controlled or which otherwise might impair applicant's ability to perform the work. Applicant further understands that the results of said drug screen will be provided to the District as part of its review of applicant's employability. Applicant herewith consents to the administration of the above described physical examination, and concurrently herewith authorizes release of said information to Byron-Bethany Irrigation District as necessary to determine suitability for employment.

Applicant: _____

Date: _____

**YOUR APPLICATION WILL BE CONSIDERED ACTIVE FOR 30 DAYS
FOR CONSIDERATION AFTER THAT YOU MUST REAPPLY IN PERSON**

U.S. law requires that, if hired, you must furnish your Social Security Card* and one of the following documents within 72 hours of starting work:

A card issued by Federal, State or local government showing your identity

Driver's license, or State issued ID card with photo ID

School ID card with photo

Current INS Forms with employment authorization stamp

U.S. passport

Voter's registration card

U.S. military card or other draft card

* If you do not have a Social Security Card, you may present an original or copy of a U.S. birth certificate, or Department or State Forms FS-545 or DS-1350 or INS Forms 1-327,1-571,1-197, 1-179.