

North Hopkins Water Supply Application for Employment

(Pre-Employment Questionnaire) (An Equal Opportunity Employer)

PERSONAL INFORMATION

DATE: _____

NAME			SOCIAL SECURITY NUMBER
	LAST	FIRST	MIDDLE

PRESENT ADDRESS

	STREET	CITY	STATE	ZIP
--	--------	------	-------	-----

PERMANENT ADDRESS

	STREET	CITY	STATE	ZIP
--	--------	------	-------	-----

PHONE NO () - **DATE OF BIRTH** / /

Are you a U.S. citizen? Yes / No

Are you 18 years or older? * Yes / No

Do you smoke? Yes / No

Are you willing to undergo drug testing? Yes / No

Have you been convicted of a felony or misdemeanor within the last 5 years? ** Yes / No

If yes, please describe _____

Will you allow us to run a criminal history on you? Yes / No

Will you allow us to run a driving record on you? Yes / No

* The Age Discrimination in Employment Act of 1967 prohibits discrimination on the basis of age with respect to individuals who are at least 40 but less than 70 years of age.

** You will not be denied employment solely because of a conviction record, unless the offense is related to the job for which you have applied.

I understand and agree that I may be required to take one or more: physical examination; lie detector test(s), drug screening as a condition of hiring or continued employment. I agree to consent to take such test(s) at such time as designated by the Company and to release the Company, its directors, officers, agents or employees from any claim arising in connection with the use of such test(s). Yes ____ No ____

INITIALS: _____ **DATE:** _____

EMPLOYMENT DESIRED

POSITION	DATE YOU CAN START	SALARY DESIRED
-----------------	---------------------------	-----------------------

ARE YOU EMPLOYED NOW? **IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER?**

EVER APPLIED TO THIS COMPANY BEFORE? **WHERE?** **WHEN?**