APPLICATION FOR EMPLOYMENT

Clifton Sanitation District ("Employer") is an Equal Opportunity Employer. Employer does not unlawfully discriminate on the basis of race, color, sex, gender, gender identity, gender expression, pregnancy, sexual orientation, national origin, ancestry, religion, creed, age, physical or mental disability, genetic information, veteran or military status, or other protected status.

PROVIDE ALL/ONLY INFORMATION REQUESTED OR YOU MAY BE DISQUALIFIED.

I. Personal Information

Last Name	First Name Middle Initial		st Name Middle Initial	
Street Address	City	State	Zip	Phone
Are you 18 years of age or older? Yes	No			
Are you lawfully authorized to work in th	e United States? Y	Yes 1	lo	
If you are related to any of our employees, known.				the employee's position with Employer,
For what position(s) are you applying?				
For what position(s) are you applying? On what date will you be available for wor	rk?	Are vou on la	voff and su	bject to recall? Yes No
What are you willing to work? Full Time_	Part Time	Tempor	arv (dat	es $/$ to $/$)
List days of week and hours of day you can	n't work:			
List days of week and hours of day you can Do you have any commitments that will no consecutive days within the next six month			es," explain	1:
	d? Yes N	0		·•
Will you work over 40 hrs/week if require	u. 105 10	·		
Will you work over 40 hrs/week if require Will you accept out-of-town assignments i	f required? Yes	No		
Will you work over 40 hrs/week if require Will you accept out-of-town assignments i Why do you want this job?	f required? Yes	No	·	

I identify that I meet all required educational, experience, and certification/license qualifications of the job. Yes___No___. If "No" what qualifications do you lack?

I reviewed the essential job functions and state that I can perform these functions with or without reasonable accommodation. Yes____ No____

III. Employment History

(List chronologically every employer during the past 10 years beginning with most current. Add sheets, if necessary. Do Not Omit any prior employment within this period.)

Date (MO/YR) (From To)	Name/Address/Phone of Employer	Last Position	Reason for Leaving

Explain any gaps in your work history that are longer than six months.	Explain a	any gaps in	your work history	/ that are longer	than six months.	
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Have you ever been fired from a job or quit under	threat of being fired?	Yes	No	If Yes,	when?	Who was the
employer?	What reason did the					

Please describe any problems in your current job about which you have been warned or disciplined during the past 12 months:

Who should we contact to confirm current employment data?	
· · ·	Name / Title / Telephone #
Can we talk to your current employer now, or only if you are hired?	Now Only if hired
Have you ever been employed by us before? Yes No If "Ye reason for leaving:	s" please state the positions held, period of employment and

IV. Education

School	Name and Location	Graduated? Y/N	Major Subjects
High School			
College			
Technical or Graduate School			

What special training or skills do you have for this job position?

V. Criminal Record

Have you been convicted of or plead guilty (includes also deferred judgment and no contest plea) to a crime or subjected to court martial? (Do not include crimes for which public records are sealed or have been expunged) Yes___ No___. If "Yes," identify nature of the offense, county and state where convicted, date of conviction, and sentence or fine imposed.

If you are presently charged with committing a criminal offense, identify nature of offense, county and state where charges are pending, and status of the charges: ______.

VI. Illegal Drugs. Within the past 60 days, have you used marijuana, cocaine, any narcotics, amphetamines, or barbiturates? Yes______No ____. And have you used other controlled substances that were not taken as prescribed to you by a physician? Yes______No ____.

VII. References (Business and Professional only)

Name	Address/Phone	Relationship/ Years Acquainted

PLEASE READ THE FOLLOWING PARAGRAPH BEFORE SIGNING THIS APPLICATION

I certify that the information in this application is correct to the best of my knowledge. I understand that any misrepresentation of information by statement or omission will result in disqualification or, if already hired, dismissal from employment, no matter when the misrepresentation is discovered. I authorize Employer to contact my references, investigate my employment history, education, criminal record, and if applicable, driving record, and to obtain a consumer report regarding me. I agree to assist Employer in obtaining background information on me by signing any authorization/release forms necessary to obtain such information. I will submit to and pass any drug test required by Employer as a condition of employment. All employment with Employer is at-will, meaning that employment with Employer may be terminated, with or without cause, and with or without prior notice, at any time, at the option of either me or the Employer's right to terminate employment at will. I understand that Employer has policies and procedures that I must follow, if hired. I understand that Employer reserves the right to change its policies and procedures, including personnel policies and employee benefits at any time without approval by employees, and that these changes are accepted by continuing my employment with Employer. I certify that I am submitting this application because of a good faith desire for employment with Employer. If offered employment, I will consider the offer, and if I accept, I will fulfill the requirements of the job to the best of my ability.