

MANAGEMENT EMPLOYMENT APPLICATION

Applying For the Position Of:			Date:			
Personal						
Last Name	First Name		Middle Name			
Street	City		State	ZIP		
Cell Phone	Home Phone		Email Address			
D.L. Number	Class	Expiration				
Employment Information						
Some jobs require weekend, sta	andby, call back and/or	overtime work. Are you a	available for work on:			
Weekends? S	tandby?	Call Back? Over the State Call Back?	lo Overtime? □ <sub>Y</sub>	es No		
If hired, on what date can you start work? Salary Desired \$ per			_ per			
Are you on lay-off and subject to recall? $\Box_{Yes}$ $\Box_{No}$ If yes, please explain on a separate sheet.						
May we contact your current em	nployer?  _Yes  No					
List any job related organization	s in which you hold me	embership:				

### Education And Training

List Name and Complete Address of Schools Attended		Major	Did you graduate or receive GED?	Degrees, Diploma, Certificate, or # of units completed.
High School				
			Yes No	
Community College				
			Yes No	
University				
			Yes No	
Vocational/Trade				
			Yes No	
Do you have any other experience, qualifications, skills, certifications, or licenses that you feel make you especially suited for the position for which you				
are applying? Yes No If yes, please explain:				

## Employment History

Beginning with the most recent, list all jobs and periods of unemployment for the past 10 years. All sections must be filled in even if a resume is attached. Please begin with your most recent job (attach additional sheets if necessary). Failure to truthfully account for all time periods and jobs is grounds for rejection or termination.

Employer Name	Title of Position
From: To:	Duties:
Number & Street	
City, State ZIP	
Supervisor's Name and Title	Reason For Leaving:
Phone	Salary: May We Contact This Employer? Yes No

Employer Name	Title of Position
From: To:	Duties:
Number & Street	
City, State ZIP	·
Supervisor's Name and Title	Reason For Leaving:
Phone	Salary: May We Contact This Employer? Yes No

Employer Name	Title of Position
From: To:	Duties:
Number & Street	
City, State ZIP	
Supervisor's Name and Title	Reason For Leaving:
Phone	Salary: May We Contact This Employer? Yes No

#### References

#### List three individuals not related to you who have knowledge of your work capability.

	Name	Address	Phone
1			

	Name	Address	Phone
2			

	Name	Address	Phone
3			

#### Military / Volunteer Service

Have you obtained any special knowledge, skills, or abilities that relate to the job for which you are applying as the result of service in the military and/or volunteer service? $\Box_{\text{Yes}}$ $\Box_{\text{No}}$
If yes, describe and list dates:

#### Convictions

Have you received any vehicle citations for moving violations within the last five years?  $\square_{Yes}$   $\square_{No}$ If yes, please explain fully on the lines below. Attach a separate sheet if this space is not adequate. (A yes answer to this question is not an automatic bar to employment. Each case is considered individually for positions requiring a valid California Driver's License.)

Relatives

Do you have any relatives working for the District?	Yes	No	If yes, provide name and	d relationship:
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Applicant Disclosure, Waiver, Release & Agreement

I, \_\_\_\_\_\_\_\_\_ (print name), have submitted a job application with Yorba Linda Water District. I am aware and acknowledge that Yorba Linda Water District may conduct a background investigation for employment purposes and obtain an investigative consumer report as part of the application process. I further acknowledge that Yorba Linda Water District's purpose in seeking an investigative consumer report regarding me is to evaluate my qualifications and suitability for employment with Yorba Linda Water District.

I am aware that the investigative consumer report may contain information regarding MY CHARACTER, GENERAL REPUTATION, PERSONAL CHARACTERISTICS AND MODE OF LIVING. I certify that I have not knowingly withheld any information that might adversely affect my chances for employment, and that the answers given by me are true and correct to the best of my knowledge.

I am aware that the investigative consumer report will be made by Norman A. Traub Associates, (714) 693-3428, www.normtraub associates.com. I acknowledge that I have the right to request Norman A. Traub Associates to provide me with a copy of the report and to make its files regarding me available for inspection.

In connection with the job application process only, I authorize Yorba Linda Water District to procure an investigative consumer report regarding me for employment purposes. I further authorize all of my current/former employers and references to release information to Yorba Linda Water District regarding my current and past employment. I further authorize all of my current/former employers or its agents to answer whether it would rehire me.

I also authorize all current and former employers and/or their agents to respond candidly to verbal and/or written inquiries from Yorba Linda Water District regarding my employment record, including but not limited to: job positions held; dates of employment; beginning and ending pay rates; disciplinary records, including any records which have been sealed as part of a settlement; reason(s) for ending prior employment, and work performance records including information regarding reliability, incidents of dishonesty, insubordination, violence and/or unsafe behavior and harmful or threatening behavior.

I further acknowledge that Yorba Linda Water District is requesting my consumer credit report because I am seeking a position as identified in Labor Code § 1024.5 as follows, and I authorize Yorba Linda Water District to use my consumer credit report for employment purposes in connection with the job application process only (District has marked all that apply):

	†⊠	a managerial position, (defined in Section 1024.5(c)(2) as an employee who qualifies for the executive exemption from overtime pay under Industrial Welfare Commission Order 4);
t		a position in the state Department of Justice;
†		a sworn peace officer or other law enforcement position;
t		a position for which the information contained in the report is required by law to be disclosed or obtained;
	1	a position that involves regular access to personal information (as specified in Section 1024.5) for any purpose other than the routine solicitation and processing of credit card applications in a retail establishment;
	t	a position in which the person is or would be a named signatory on the employer's bank or credit card account, or
ţ	t t	authorized to transfer money or enter into financial contracts on the employer's behalf; a position that involves access to confidential or proprietary information, (as specified in Section 1024.5); or a position that involves regular access to \$10,000 or more of cash of the employer, a customer, or client, during the workday.

# [Note: As now required by Cal. Civ. Code, § 1785.20.5, if the prospective employer is requesting a consumer credit report, it must notify the applicant of the specific reason under Labor Code § 1024.5 for obtaining the report prior to the request. Thus, the prospective employer should check the appropriate box above before providing this form to the applicant.]

In addition, I authorize all of my current/former employers or its agents to release the contents of and/or to provide a photocopy of my entire personnel file, if requested by Yorba Linda Water District, including any documents sealed pursuant to any settlement agreement or stipulation, and all application information including questionnaires, interviews, and education transcripts. I further authorize the disclosure of all records to which, as an employee, I would have or did have access to under Labor Code section 1198.5.

I understand that any offer of employment I may receive will be contingent upon my passing a pre-employment physical examination and screening for the presence of alcohol and/or controlled substances in my system, performed by a doctor selected by the Agency. I further understand and consent to the disclosure of the results of physical examinations and related tests to authorized District personnel.

I understand that, if hired, I will be required to provide proof of identity and eligibility for employment in the United States of America, as required by the Immigration Reform and Control Act (IRCA) of 1986 and as amended by the Immigration Act of 1990. I understand that, if hired, a printout of my Department of Motor Vehicles record will be required five (5) calendar days prior to my start date. I further understand that I may be required to be fingerprinted as a condition of employment.

I understand that nothing contained in the application, posting, job description, in any printed materials provided to me during the employment process, or conveyed during any interview(s), which may be granted, is intended to create an employment contract between me and the YLWD. In addition, I understand and agree that, if I am employed as a regular, non at-will employee, my employment is subject to a probationary period of twelve (12) months during which time I may be terminated at any time without cause or notice.

I have received a copy of this Disclosure, Waiver, Release and Agreement and had adequate time to review it. I understand the meaning and purpose of this Disclosure, Waiver, Release and Agreement, and by signing this document, I release all of my current/former employers including its officers, employees, or related personnel both individually and collectively, from any and all liability for damage of whatever kind, which may at any time result to me, my heirs, and family associates because of this Disclosure, Waiver, Release and Agreement or any attempt to comply with it. Specifically, none of my current/former employers or its agents will

be subject to any civil liability for any relevant cause of action by virtue of releasing information identified above in compliance with California Civil Code section 47 as amended.

This Disclosure, Waiver, Release and Agreement will expire one (1) year after the date signed. A photocopy of this Disclosure, Waiver, Release and Agreement is to be considered as valid as an original.

# I consent to Yorba Linda Water District accessing my personnel files and authorize Yorba Linda Water District to obtain a copy of my personnel files from all of my current and former employers.

I hereby acknowledge that I have read the foregoing statements and agreements and agree to be bound by them.

		Date:
Appli	cant's Sig	Inature
Socia	al Security	/ #
		ELECTION TO RECEIVE/NOT RECEIVE COPY OF INVESTIGATIVE CONSUMER REPORT
	1	I wish to receive a copy of any investigative consumer report that is prepared. I understand that a copy of the report will be provided to me within three (3) business days of receipt of the investigative consumer report by Yorba Linda Water District.
ţ		I do <b><u>NOT</u></b> wish to receive a copy of any investigative consumer report that is prepared.
(Print	t applicant	ťs name)
		Date:
(Appl	licant's Sig	gnature)
[Cal.	Civ. Code	e, § 1786.16, subd. (b)(1)]

The Yorba Linda Water District is an Equal Opportunity Employer. Employment decisions will comply with all applicable federal laws prohibiting discrimination in employment including Title VII of the Civil Rights Act of 1964, the Age Discrimination in Employment Act of 1967, the Americans with Disabilities Act of 1990, the Immigration and Nationality Act, and any applicable state laws.