



COOS BAY-NORTH BEND WATER BOARD
2305 Ocean Boulevard - P. O. Box 539
Coos Bay, Oregon 97420-0108
Phone (541)267-3128 Fax (541)269-5370
www.cbnbh2o.com

EMPLOYMENT APPLICATION

Please Note: To be considered, this application form must be completed in its entirety. A resume may be submitted in addition to this form but is not required.

Position for which you're applying _____ Date _____

Name _____
Last First Middle

Mailing address _____
number and street or post office box number; city, state, & zip code

Telephone No. _____ Date available for employment: _____

Education

HIGH SCHOOL _____
(name and address of school)

Course of study _____ Years completed _____ Diploma/degree _____

UNDERGRADUATE COLLEGE _____
(name and address of school)

Course of study _____ Years completed _____ Diploma/degree _____

GRADUATE PROFESSIONAL _____
(name and address of school)

Course of study _____ Years completed _____ Diploma/degree _____

Special Skills/Training/Certifications

List any special training, licenses, certificates, machine skills, office equipment skills, or other special skills you may have that are pertinent to the position for which you are applying.

Employment Experience

Beginning with your present or most recent job, describe your work experience related to the position for which you are applying. At a minimum, please supply 10 years of employment history if available. Include all military, non-paid, or volunteer work related to the position. **If additional space is needed to list "specific duties" or if more space is needed for employment history, please attach a separate sheet.**

1. Employing firm _____ Phone _____
Address _____
Your position _____ Your supervisor _____
Length of employment: from _____ to _____

Specific duties _____

Reason for leaving _____
Do you still work here? yes no May we contact this employer? yes no

2. Employing firm _____ Phone _____
Address _____
Your position _____ Your supervisor _____
Length of employment: from _____ to _____

Specific duties _____

Reason for leaving _____
Do you still work here? yes no May we contact this employer? yes no

3. Employing firm _____ Phone _____
Address _____
Your position _____ Your supervisor _____
Length of employment: from _____ to _____

Specific duties _____

Reason for leaving _____
Do you still work here? yes no May we contact this employer? yes no

Veteran's Preference

Have you served on active duty in the U.S. Armed Services? Yes _____ No _____

Have you been honorably discharged or released under honorable conditions? Yes _____ No _____

Dates of service: _____ to _____

Attach a copy of your DD214, DD215, or veteran's disability preference letter.

Dates of combat service: _____ to _____

Have you received a combat or campaign ribbon or expeditionary medal for service in the Armed Forces and were discharged or released from active duty under honorable conditions? Yes _____ No _____

Are you receiving a non-service connected pension from the Department of Veterans' Affairs? Yes _____ No _____

Do you have a disability rating from the Department of Veterans' Affairs or have been awarded the Purple Heart? Yes _____ No _____

List the duties in the Service, including any special qualifications or training and/or transferrable skills applicable to the position for which you have applied – use additional page if needed. _____

List Three References

(Do not list relatives or former supervisors. List three references who are familiar with your qualifications and actual work history and ability.)

Name	Occupation/Relationship	Years Known	Telephone
1.			
2.			
3.			

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status? yes no

Can you perform the essential functions of the job for which you are applying? yes no

The Water Board is an equal opportunity employer. All applicants will be considered without regard to age, color, national origin, religion, sex, or other protected status in accordance with applicable federal and state equal employment opportunity laws.

Would a close relative be supervised by you in the position for which you are applying? yes no

Would you be supervised by a close relative in the position for which you are applying? yes no

If driving is required for the position for which you are applying, your driving record will be checked before employment. Please provide your driver's license number and the state where issued: _____

To insure that you are not placed in a position which might be a hazard to you or to others, a physical examination or other forms relating to your physical condition may be required after an offer of employment has been extended.

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.

- This application will remain on active status for 90 days. If I am hired within this period, this form will be transferred to my individual personnel file.
- If I am not hired within 90 days, this application is no longer active and I will need to reapply for employment if I wish to be considered for a job with Coos Bay-North Bend Water Board.
- Any misrepresentation or falsification of information or significant omissions will be cause for rejection of my application or for subsequent discipline up to and including my dismissal from employment if discovered at a later date.
- I may be required to submit to a physical examination prior to beginning employment.
- If my application for employment is accepted, the effective date of my employment shall be the time I actually begin to work. If I am employed, I agree to comply with and be bound by the safety and health rules and regulations and rules of conduct of the Coos Bay-North Bend Water Board. I will be responsible for familiarizing myself with all rules and regulations of the Water Board as they presently exist or are later modified.
- If hired, I can provide proof of identity and authorization to work.
- My employment is not guaranteed for any term, and my employment may be terminated by the Coos Bay-North Bend Water Board or myself at any time. No management official is authorized to make any oral assurance or promise of continued employment.
- I authorize and give consent to my current and prior employers, educational institutions, and persons or organizations named in this application (or accompanying resume) to release any information to the Coos Bay-North Bend Water Board that may be required to make an employment decision.

Signature of applicant _____ Date _____

Coos Bay-North Bend Water Board considers all applicants for employment without regard to race, religion, color, sex, age, national original, physical or mental disability, marital or familial status, or membership in any other group protected by law in accordance with applicable federal, state, and local laws. In addition, Coos Bay-North Bend Water Board complies with applicable state and local laws prohibiting discrimination in employment and provides reasonable accommodation to individuals with a disability in accordance with applicable laws.

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AUTHORIZATION FOR RELEASE OF PERSONAL DATA

I, the undersigned, hereby authorize and request any present or former employer, educational institution, law enforcement agency, financial institution, or other persons having personal knowledge about me to furnish the Coos Bay-North Bend Water Board, and/or its agents, with any and all information in their possession regarding me in connection with an application for or retention of employment. Further, I hereby release from liability and hold harmless all persons and corporations supplying this information to the Coos Bay-North Bend Water Board and/or its agents. A photocopy of this authorization is as effective as the original.

The Water Board's screening and selection procedure requires that the Water Board be able to obtain references on its candidates. I understand that if the Water Board is unable to obtain a complete and in depth reference from a current or former employer after providing him/her with a copy of this release, at its option, the Water Board may remove me from consideration for the position for which I have applied. I also understand that if I do not sign this Authorization for Release of Personal Data, my application will be rejected.

Signed: _____

Printed Name: _____

Date: _____

Social Security Number: _____