

Wylie Northeast Special Utility District

745 Parker Rd. / P.O. Box 1029

Wylie, TX 75098

Phone 972-442-2075

EMPLOYMENT APPLICATION

It is the policy of Wylie Northeast Special Utility District to provide equal employment opportunities to all qualified persons without regard to race, creed, color, religious belief, sex, age, national origin, physical or mental handicap or veteran status.

Note: After completion, email to amanda@wylie-northeastwater.com

Position applying for: _____

PERSONAL INFORMATION

First Name Middle Initial Last Name

Current Address City State Zip Code

Permanent Address if different from above

Telephone: _____ Mobile Phone: _____

Email Address: _____

Social Security # _____ Driver's License # and Type _____ State _____

Have you had any automobile accidents during the past three years? Yes No If yes, how many? _____

Have you had any moving violations in the past three years? Yes No If yes, how many? _____

Have you ever been convicted of a criminal offense? Yes No

If yes, please explain nature of offense(s) and give date of occurrence(s) and type(s) of rehabilitation _____

I am an U.S. Citizen or otherwise authorized to work in the United States on an unrestricted basis: Yes No

If applicable, please list your visa type, visa number and expiration: _____

First Name

Middle Initial

Last Name

EMPLOYMENT HISTORY

Begin with present or most recent employer.

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

PRIOR EMPLOYMENT

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

First Name

Middle Initial

Last Name

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

First Name

Middle Initial

Last Name

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

Employer: _____

Address: _____

Job Title: _____

Salary: _____

Duties: _____

Dates of employment: _____ to: _____

Supervisor: _____ May we contact? Yes No
Name Title

Reason for leaving: _____

First Name

Middle Initial

Last Name

EDUCATION

High School

Name and Address

Did you graduate? Yes No Attended from _____ to _____

If you did not graduate, did you receive your GED? Yes No

Special honors or awards: _____

Technical or Vocational School

Name and Address

Did you graduate? Yes No Attended from _____ to _____

Degree: _____ Major: _____

Special honors or awards: _____

College or University

Name and Address

Did you graduate? Yes No Attended from _____ to _____

Degree: _____ Major: _____

Special honors or awards: _____

First Name

Middle Initial

Last Name

POSITION INFORMATION

Position Specifications

Position applying for: _____

How did you hear about this job? _____

What hours are you willing to work? _____

Would you be able to work weekends? Yes No

Are you willing to travel for the job? Yes No

When would you be able to start? _____

Desired salary: _____ per _____

SKILLS

Please describe any skills you have in the following areas:

Computer:

License or Certifications:

Other:

| License Type and Level | License Number | Exp. Date |
|-------------------------------|-----------------------|------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Signature of Applicant

Date