

BEULAH UTILITIES DISTRICT

Employment Application

Thank you for your interest in employment with the Beulah Utilities District.

The District provides water, fire protection, and first responder services to over 3500 customers in the northeast corner of Lee County, Alabama.

The District is governed under a charter from the state of Alabama and is governed by a five-person board of directors

This application is for employment in the Water _____ Fire _____ Department.

APPLICATION FOR EMPLOYMENT

AN EQUAL OPPORTUNITY EMPLOYER

* All qualified applicants will receive consideration for employment without regard to race, color, religion, sex, sexual orientation, gender identify, or national origin.

PERSONAL INFORMATION

Date: _____

Name: _____

Last

First

Middle

Social Security No.: _____

Present Address: _____

Street

City

State

Zip

Permanent Address: _____

Street

City

State

Zip

Phone Number: _____

Are you 18 Years or Older? Yes ☐ No ☐

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? _____

Referred by: _____

EDUCATION

	Name and Location of School	No. of Years Attended	Did you Graduate?	Subjects Studied
High School				
College				
Trade, Business, or Correspondence School				

GENERAL

Subjects of Special Study or Research Work: _____

Special Skills: _____

Activities: (Civic, Athletic, etc.): _____

Exclude organizations the name of which indicates the race, creed, sex, age, marital status, color or nation of origin of its members.

U.S. Military or Naval Service: _____ Rank: _____

Have you been convicted of a crime (other than a traffic violation) in the last ten years? Yes ☐ No ☐

If Yes, Explain: _____

FORMER EMPLOYERS (List below last three Employers, starting with last one first.)

DATE MONTH AND YEAR	NAME AND ADDRESS OF EMPLOYER	SALARY	POSITION	REASON FOR LEAVING
From: To:				
From: To:				
From: To:				

Which of these jobs did you like best? _____

What did you like most about this job? _____

Do you have an agreement (i.e. non-compete agreement) with an employer that might limit your ability to work for the District? ☐ Yes ☐ No (If "yes," you must provide a copy.) _____

REFERENCES (Give the names of three persons NOT related to you, whom you have known at least one year.)

NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1.			
2.			
3.			

IN CASE OF EMERGENCY, NOTIFY:

NAME	ADDRESS	PHONE NUMBER
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"I certify that all the information submitted by me on this application is true and complete, and I understand that if any false information, omissions, or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. In consideration of my employment, I agree to conform to the District's rules and regulations, and I agree that my employment and compensation can be terminated, with or without cause, and with or without notice, at any time, at either my or the District's option. I also understand and agree that the terms and conditions of my employment may be changed, with or without cause, and with or without notice, at any time by the District. I understand that no District representative, other than its Chairman, and then only when in writing and signed by the Chairman, has any authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing."

DATE	SIGNATURE
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DO NOT WRITE BELOW THIS LINE

Interviewed By: _____ Date: _____

Remarks: _____

Neatness: _____ Ability: _____

Hired: Yes ☐ No ☐ Position: _____ Dept.: _____

Salary/Wage: _____ Date Reporting to Work: _____

APPROVED: 1. _____ 2. _____ 3. _____
EMPLOYMENT MANAGER DEPT. HEAD GENERAL MANAGER
