

# APPLICATION FOR EMPLOYMENT

## Northstar Community Services District *An Equal Opportunity Employer*

900 Northstar Drive  
Truckee, CA 96161  
(530) 562-0747 / FAX 562-1505

### **INSTRUCTIONS TO APPLICANTS:**

1. All applicants must complete all questions in this application.
2. You may attach a resume or any additional information you would like to volunteer regarding certificates, special training, licenses, or any other form of documentation about yourself which would assist your employment possibility.
3. Please return application to the Northstar Community Services District.

DATE \_\_\_\_\_

### **CONTACT / RELEVANT INFORMATION**

Name \_\_\_\_\_  
Last First Middle

Mailing Address \_\_\_\_\_  
PO Box / Street City State Zip

Street Address \_\_\_\_\_  
(If different from above) Street City State Zip

Home Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Work Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Cell Phone (\_\_\_\_) \_\_\_\_ - \_\_\_\_

Email Address \_\_\_\_\_

Position(s) for which you're applying \_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Are you applying for:

Regular Full-Time Work?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Regular Part-Time Work?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Temporary Work?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

If applying for temporary or extra work, during what period of time will you be available?

Start \_\_\_\_\_ Finish \_\_\_\_\_

Are you available to work weekends? Yes ☐ No ☐

Would you be available to work overtime, if necessary? Yes ☐ No ☐

If hired, on what date can you start work? \_\_\_\_\_

If hired, would you have a reliable means of transportation to and from work? Yes ☐ No ☐

Are you at least 18 years old? Yes ☐ No ☐  
(If under 18, hire is subject to verification that you are of minimum legal age.)

Are you able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes ☐ No ☐

If no, describe the functions that cannot be performed:

(Note: We comply with the ADA and consider reasonable accommodation measures that may be necessary for eligible applicants and/or employees to perform essential functions. Hire may be subject to passing a medical examination, including a drug test, and to skill and agility tests.)

## **BACKGROUND INFORMATION**

Can you submit verification of your permanent legal right to work in the United States? Yes ☐ No ☐

If no, state your current citizenship status in the space below.

Have you served in the U.S. Military? Yes ☐ No ☐  
If yes, state relevant skills acquired during applicant's U.S. Military Service in the space below.

Have you ever applied or worked for the NCSD?  
If yes, state dates and position held in the space below.

Yes ☐ No ☐

Do you have any relatives or friends working for the District?  
If yes, state name(s) in the space below.

Yes ☐ No ☐

Are you currently employed?  
If so, may we contact your current employer?

Yes ☐ No ☐

Yes ☐ No ☐

## **REFERENCES**

List three personal or professional references other than relatives who have first hand knowledge of your work performance within the last three years.

	Name	Address	Phone / Email	Profession
1.				
2.				
3.				

## **EDUCATION**

	Years Attended	Name of School	City and State	Date Last Attended	Degree Acquired	Major Course or Subject
High School						
College/ University						
Vocational/ Business						
Other Courses of Study						

Do you speak, write or understand any foreign language(s)?  
If yes, list the foreign language(s) below.

Yes ☐ No ☐

Do you possess any other experiences, training, qualifications, or skills which  
you feel make you especially suited for work at the NCSD?  
If so, please explain below.

Yes ☐ No ☐

### **EMPLOYMENT EXPERIENCE / WORK HISTORY**

List below all present and past employment starting with your most recent employer. Account for all periods of unemployment. You must complete this section if attaching a resume.

Employer 1	Type of Business	Dates of Employment:	Name of Supervisor	Reason for Leaving
Name Address  Phone		From  To		

Title and duties of position:

May we contact Employer 1 for a reference?

Yes ☐ No ☐

Employer 2	Type of Business	Dates of Employment:	Name of Supervisor	Reason for Leaving
Name Address  Phone		From  To		

Title and duties of position:

May we contact Employer 2 for a reference?

Yes ☐ No ☐

Employer 3	Type of Business	Dates of Employment:	Name of Supervisor	Reason for Leaving
Name Address  Phone		From  To		

Title and duties of position:

May we contact Employer 3 for a reference?

Yes ☐ No ☐

Employer 4	Type of Business	Dates of Employment:	Name of Supervisor	Reason for Leaving
Name Address  Phone		From  To		

Title and duties of position:

May we contact Employer 4 for a reference?

Yes ☐ No ☐

***Note: You may attach additional page(s) if necessary***

### **CERTIFICATION**

I hereby certify that all statements made in this application are correct to the best of my knowledge and belief, and I hereby authorize the Northstar Community Services District to investigate any information I have given herein, with the understanding that omission or misrepresentation of facts may be grounds for rejection of the application or dismissal. I further understand that I may be required to pass a medical examination and be fingerprinted at no cost to me, prior to appointment to a position.

Signature\_\_\_\_\_ Date\_\_\_\_\_

**Please Read Carefully, Initial Each Paragraph, and Sign Below**

\_\_\_\_\_  
*Initials*

I hereby 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 further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

\_\_\_\_\_  
*Initials*

I hereby authorize Northstar Community Services District to thoroughly investigate my references, work record, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the company any and all letters, reports and other information related to my work records, without giving me prior notice of such disclosure. In addition, I hereby release the company, my former employers and all other persons, corporations, partnerships and associations from any and all claims, demands or liabilities arising out of or in any way related to such investigation or disclosure.

\_\_\_\_\_  
*Initials*

I understand that nothing contained in the application or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without prior notice, at the option of either myself or the company, and that no promises or representations contrary to the foregoing are binding on the company unless made in writing and signed by me and the Company's designated representative.

\_\_\_\_\_  
*Initials*

Should a search of public records (including records documenting an arrest, indictment, conviction, civil judicial action, tax lien or outstanding judgment) be conducted by internal personnel employed by the Company, I am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

☐

I waive receipt of a copy of any public record described in the paragraph above.

Signature\_\_\_\_\_

Date\_\_\_\_\_