Santa Nella County Water District
12931 State Highway 33 • Santa Nella, CA 95322
PH: (209) 826-0920 • FAX: (209) 826-8359

APPLICATION PACKAGE

The Santa Nella County Water District is currently accepting applications for Water Treatment Operators, Wastewater Treatment Operators, and Maintenance Workers.

The Santa Nella County Water District (District) provides drinking water and wastewater services to the community of Santa Nella. The District is seeking to hire dedicated and hard-working individual(s) who are not afraid to work outside and learn the awesome career of water and wastewater treatment.

The District is seeking a motivated and career driven individual. The individual must be energetic, hard-working, and have a desire to learn water and wastewater treatment skills that are acquired through education and certification. The candidate should be ready to perform any type of task, whether it be removing weeds, cleaning sewer lift stations or taking drinking water samples once certified. He or she takes pride in the work product and exhibits proper attendance and punctuality.

He or she should be a team player, enjoy working outside in all types of weather, and be willing to become certified in water and/or wastewater treatment within 18 months of hire. Certification pay is above and beyond regular wages. With proper certification, On-Call Duty is available, which includes Duty Pay.

If this sounds like you, please complete the Application Package. Read and follow the instructions carefully:

1. Read the job description for the position you are applying for.
2. Complete the entire Application in hand-written blue or black ink. Typed Applications will be rejected.
3. Make sure to read the last page of the Application and answer the question at the beginning of the narrative. Sign and date. Applications without the question answered, unsigned and/or not dated will be rejected.
4. Please include a print-out of your current DMV driving record, within the last 30 days.
5. Include copies of any certifications in water or wastewater treatment, distribution and/or collection.
6. Return the Application Package to the District.

The District offers health, dental, vision and life insurance, and provides two weeks of paid vacation, 12 days of sick leave, and 11 holidays annually, and participates in the California Public Employees Retirement System (CalPERS). Additional retirement supplement (CalPERS 457) is also available.

See **sncwd.com** for job descriptions, and wage and certification schedules.

If you have any further questions, please contact (209) 826-0920.

The Santa Nella County Water District is an Equal Opportunity Employer.

SANTA NELLA COUNTY WATER DISTRICT
APPLICATION FOR EMPLOYMENT

INCLUDE DMV PRINTOUT OBTAINED WITHIN THE LAST 30 DAYS
Applications submitted without DMV printout will be rejected

PERSONAL INFORMATION: **Date:**_____

Name:_____
Last First Middle

Social Security Number:_____ Phone Number:_____

Referred By:_____

All Names Used In the Past:

_____
Last First Middle

Present Address:_____
Street City State Zip

Permanent Address:_____
Street City State Zip

State Name of Any Relatives Working or Have Worked For Santa Nella County Water District:

_____

_____

EMPLOYMENT DESIRED:

Position: _____ Date You Can Start:_____

Are You Employed Now? _____

May We Contact Your Present and/or Past Employers? _____

Have You Ever Worked for this District? _____ If So when? _____

Have You Ever Applied to this District? _____ If So when? _____

Are you available to work:

Full-time	Part-time	Shift-work	Temporary
On-call	Weekend	Overtime	

EDUCATION AND SKILLS:

	High School	Trade School	Undergraduate College/University	Graduate/ Professional
School Name and Location				
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree				
Describe Course of Study				
Describe any specialized training, apprenticeship, skills or extra-curricular activities that are relevant to the job for which you are applying				
Describe any honors, scholarships, appointments or awards you have received				
State any additional information you feel may be helpful to us in considering your application				

Indicate any foreign languages you can speak, read and/or write			
	Fluent	Good	Fair
SPEAK			
READ			
WRITE			

List professional, trade, business or civil activities and offices held. You may exclude information that would reveal sex, race, religion, national origin, age, ancestry, or disability or other protected status or personal information:

List any professional or vocational certificates, licenses, or registrations that you currently hold or have held in the past:

_____

_____

List any job-related professional or technical organizations to which you belong:

_____

_____

U.S. Military Service? ☐ No ☐ Yes Rank: _____

Citations/Awards: _____

List any job-related skills that you learned while in the U.S. Military:

_____

_____

_____

Driver's License Information:

State: _____ Number: _____ Expiration Date: _____

Restrictions or Suspensions (respond fully if driving is required by the job for which you are applying):

_____

_____

GENERAL INFORMATION:

Have you entered into any agreements with any former employer (for example, an agreement not to compete or confidentiality agreement) that may impact your ability to work for the District?

☐ No ☐ Yes

Are you over 18 years of age? ☐ No ☐ Yes

Have you read the Job Description for which you are applying?

☐ No ☐ Yes

Are you able to perform the duties of the position for which you are applying, including regular attendance?

☐ No ☐ Yes

FORMER EMPLOYERS:

Start with your present or last job. Include any job-related military service assignments and volunteer activities.

1. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

2. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

3. Employer:		Dates Employed		Work Performed
Address		From	To	
Telephone Number(s)		Hourly Rate/Salary		
Job Title	Supervisor	Starting	Final	
Reason for Leaving				

Did you receive written performance evaluations from any of your prior employers?

☐ No ☐ Yes

If so, please list the employers that did such evaluations, describe the frequency of such evaluations and check the appropriate box indicating whether you signed such evaluations:

☐ No ☐ Yes

Employer	Frequency of evaluations (e.g., annual, bi-annual, etc.)	Signed?
		☐ Yes ☐ No
		☐ Yes ☐ No
		☐ Yes ☐ No

Have you been discharged or asked to resign from a positions or a job? ☐ No ☐ Yes

Explain reasons:

_____

_____

_____

Explain any gaps in your employment history. (Do not provide information about any physical or mental disabilities or other medical information.) _____

_____

_____

REFERENCES:

List three non-employment references that are not related to you, and have known you for at least one year.

Name Address Telephone Number Years Acquainted

1. _____
2. _____
3. _____

In Case of Emergency Notify: _____
Name

_____
Address Telephone Number

I understand and acknowledge the following:

1. I understand that I am entitled to copies of any public records obtained directly by the District in connection with my application for employment. Check one:

I waive ☐ do not waive ☐ my right to receive copies of public records obtained directly by the District.

2. If I am offered employment, I will, as a condition of employment, be required to submit proof of my identity and legal right to work in the U.S.

3. I understand that, if I am employed, any false statement, misrepresentation, or omission of facts on this application or on any supporting documents, regardless of when discovered to be false or omitted, may result in my immediate dismissal.

4. I understand that I will be required to possess a current and valid California driver's license in order to be eligible for consideration of employment.

5. I agree that, if I am offered a position, it will be offered on condition that my employment shall be at will and for no definite period, and that my employment may be terminated at any time with or without cause and with or without prior notice.

6. I agree that I will settle any and all previously unasserted claims, disputes, or controversies arising out of or relating to my employment, my application or candidacy for employment, and/or cessation of employment with Santa Nella County Water District, exclusively by final and binding arbitration before a neutral Arbitrator (pursuant to the District's Alternative Dispute Resolution Policy). By way of example only, such claims include claims under federal, state, and local statutory law, such as the Fair Employment and Housing Act, Age Discrimination in Employment Act, Title VII of the Civil Rights Act of 1964, as amended, including the amendments of the Civil Rights Act of 1991, the Americans With Disabilities Act, the law of contract and the law of tort.

7. If I am offered employment, I will as a condition of employment, furnish proof that I am over 18 years of age.

8. I agree that, if I am offered employment, I will be required to conform to the rules and regulations of the District.

9. I authorize investigation of all statements contained in this application and any supporting documents. I authorize the District to secure information about my experience from former employers, educational institutions, government agencies, or any references I have provided, and for those parties to provide information concerning my experience and I hereby release all parties from any liability arising from such investigation.

Date: _____ _____

Signature