



Oldham County Water District Employment Application

2160 Spencer Court
LaGrange, Ky. 40031
502-222-1690

Please provide complete and legible information. You may provide a resumé, but you must also complete this form. Please print in ink or type and do not leave any blank spaces.

Oldham County Water District is an Equal Employment Opportunity employer and will not discriminate against an applicant or employee on the basis of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, military or veteran status, genetic information or any other protected basis recognized under federal, state or local laws, regulations or ordinances.

Date: _____

Position Applied for _____

Date you can begin work _____

PERSONAL INFORMATION

Full Name _____
FIRST MIDDLE LAST

Address _____
STREET CITY STATE ZIP CODE

Contact Number _____

Alternate Contact Number _____ E-mail (optional) _____

Are you legally authorized to work in the United States?
(If hired, verification will be required consistent with federal law.)

Are you under the age of 18?

BACKGROUND INFORMATION

Have you ever been convicted of a crime that has not been expunged, sealed, pardoned, annulled, statutorily eradicated or dismissed upon condition of probation? You are not required to disclose sealed or expunged records of conviction or arrest, or expunged juvenile records of conviction or arrest.

If yes, please explain. _____

EDUCATION

Type of School	School Name and Location	Highest Grade Completed	Course of Study or Major
High School or G.E.D. equivalent			
College or University			
Vocational or Trade School			
Graduate School			
Other (including military training if relevant for desired position)			

PROFESSIONAL REFERENCES

List three professional references (other than those listed as current/former supervisor) that we may contact:

Name _____	Telephone No. _____
E-mail _____	Type of Acquaintance _____
Name _____	Telephone No. _____
E-mail _____	Type of Acquaintance _____
Name _____	Telephone No. _____
E-mail _____	Type of Acquaintance _____

EMPLOYMENT RECORD

List all employment experience, starting with the most recent or present employer. Using a separate section for each position, describe in detail all work experience including periods of unemployment. **Resumés may not be substituted for completing the following employment information.**

Current Employer _____	Phone _____
Address _____	From _____
Job Title _____	Month Year
Supervisor's Name/Title _____	To _____
May we contact? _____	Month Year
Primary responsibilities _____	Reason for Leaving _____

Employer _____ Address _____ Job Title _____ Supervisor's Name/Title _____ Primary responsibilities _____	Phone _____ From _____ Month Year To _____ Month Year Reason for Leaving _____
Employer _____ Address _____ Job Title _____ Supervisor's Name/Title _____ Primary responsibilities _____	Phone _____ From _____ Month Year To _____ Month Year Reason for Leaving _____
Employer _____ Address _____ Job Title _____ Supervisor's Name/Title _____ Primary responsibilities _____	Phone _____ From _____ Month Year To _____ Month Year Reason for Leaving _____

Please account for any gaps in employment.

ADDITIONAL COMMENTS

Please list any professional memberships, certificates, designations, licenses, honors, awards, fellowships, special qualifications or other data that will assist us in considering your application for employment.

PLEASE READ CAREFULLY BEFORE SIGNING

I understand that completion of this application does not indicate that there are any open positions and does not in any way obligate Oldham County Water District to hire me or offer me a job.

I understand that Oldham County Water District is an equal opportunity employer and selects individuals based upon job-related qualifications regardless of race, color, religion, creed, national origin or ancestry, sex, age, physical or mental disability, military or veteran status, genetic information or any other protected basis recognized under federal, state or local laws, regulations or ordinances.

I hereby certify that the information I supplied on this employment application is true in all respects. I authorize Oldham County Water District and its representatives to contact my prior employers and all others for the purpose of verification of the information I have supplied, and I release all of them from liability for requesting, providing, or acquiring information about me. I authorize employers, schools and other persons named on this application to provide any information or transcripts requested.

I understand that, if hired, my employment is at will and can be terminated, with or without cause or notice, at any time, by either Oldham County Water District or me. No Oldham County Water District manager or supervisor has the authority to enter into an employment agreement for any specified period of time or to make any agreement contrary to the foregoing "at will" relationship.

I understand that Oldham County Water District reserves the right to use any method of investigation which, at its sole discretion, it deems reasonable and necessary to determine whether any employee has engaged in conduct warranting disciplinary action, including, but not limited to a search of any property of mine on Oldham County Water District premises. As a condition of continued employment, if hired, I agree to cooperate in any such investigation.

I understand that if hired, my continued employment is predicated upon the truthfulness and accuracy of the statements contained herein, and that my employment is subject to termination if any statement in this application is false or misleading. If hired, I agree to conform to the rules and regulations of Oldham County Water District as issued from time to time, and I understand that only current rules and regulations apply to my employment with Oldham County Water District.

I understand, where permissible under applicable state and local law, I may be subject to a pre-employment drug test after receiving a conditional offer of employment.

I understand employment with Oldham County Water District is also contingent on my providing sufficient documentation necessary to establish my identity and eligibility to work in the United States.

I understand this application will remain active for six (6) months and if I have not been hired by that date, I must renew my application to be considered for future employment.

BY SIGNING MY NAME IN THE SPACE BELOW, I REPRESENT THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

Applicant's Signature _____

Date _____

BY INSERTING MY NAME IN THE SPACE ABOVE, AND CLICKING THE SUBMIT BELOW TO EMAIL THE APPLICATION, I REPRESENT THAT I HAVE READ AND AGREE WITH THE ABOVE STATEMENTS.

YOU MAY ALSO MAIL OR DELIVER YOUR APPLICATION TO:
OLDHAM COUNTY WATER DISTRICT
2160 SPENCER COURT
LaGRANGE, KY 40031

AN EQUAL OPPORTUNITY EMPLOYER