Timpanogos SSD
Clean Water

APPLICATION FOR EMPLOYMENT

Please type or print clearly in black ink. Fill out the entire application completely and accurately. If questions are not applicable, enter "NA." Do not leave questions blank. Be sure to sign the application when completed. This application becomes a public record and may be subject to disclosure under applicable provisions of the Government Records Act. TSSD is an Equal Opportunity Employer and does not discriminate on the basis of race, color, national origin, sex, religion, age or disability in employment or the provision of services. If you need any reasonable accommodation to participate in the application process (such as, assistance in completing the application, accommodation for the interview, accommodation for any job-related employment tests, or any other needed accommodation), please contact Human Resources.

EMPLOYEE INFORMATION

Name: _____
(First) (Middle) (Last)

Address: _____
(Street) (City) (State) (Zip)

Phone: _(____)_____ Email: _____

List any other names used if different from the name on this application: _____

POSTION INFORMATION

Position Applying For: _____ Date Available to Start: _____

Type of Employment Desired: ☐ Full-Time ☐ Part-Time ☐ Temporary/Seasonal

ELIGIBILITY INFORMATION

Are you at least 18 years of age? _____

Do you have a legal right to work in the United States? _____

Are you related to anyone who works for or holds an elected position with TSSD? _____

If yes, name of relative and relationship to you: _____

Have you ever been employed by TSSD? _____

If necessary for the job, are you able to provide a valid Driver's License? _____

If necessary for the job, do you have a valid Commercial Driver's License? _____

EDUCATION HISTORY

Applicants may be required to provide proof of diploma, degree, transcripts, licenses, certifications, etc.

	Name and Location of School	Years Completed	Major or Course of Study	Degree Obtained
High School				
College/University				
Graduate School				
Technical/Business				

SKILLS AND QUALIFICATIONS

Other qualifications, such as special skills, abilities or honors applicable to the position: _____

_____

_____

_____

Other professional licenses, certifications or registrations applicable to the position: _____

_____

_____

_____

REFERENCES

List two (2) personal/professional references who are not relatives. References provided in this section may be contacted.

_____

(Name) (Address) (Telephone)

_____

(Name) (Address) (Telephone)

EMPLOYMENT HISTORY

List your work experience for the past ten (10) years beginning with your most recent job. Information provided in this section may be verified with former or current employers.

Employer:	Start Date:	Position Held:
Employer Address:	Leaving Date:	Immediate Supervisor:

List duties you performed, skills you used or learned, positions held and promotions: _____

_____

_____

Specific Reason for Leaving: _____

_____

_____

Employer:	Start Date:	Position Held:
Employer Address:	Leaving Date:	Immediate Supervisor:

List duties you performed, skills you used or learned, positions held and promotions: _____

_____

_____

Specific Reason for Leaving: _____

_____

_____

Employer:	Start Date:	Position Held:
Employer Address:	Leaving Date:	Immediate Supervisor:

List duties you performed, skills you used or learned, positions held and promotions: _____

_____

_____

Specific Reason for Leaving: _____

_____

_____

APPLICANT CERTIFICATION

Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided:

I hereby certify that I have personally completed this application, or I have noted the name of the individual assisting me in the completion of this application. I certify that all the information provided by me in connection with this application is true and correct to the best of my knowledge. I understand that any misstatement, falsification or omission of information or material fact on this application or any document used to secure employment may be grounds for rejection of this application, refusal to hire, or immediate termination if hired, regardless of the time elapsed before discovery.

I hereby authorize Timpanogos Special Service District to thoroughly investigate my references, work record, education, and other matters related to my suitability and qualifications for employment with the District. I authorize Timpanogos Special Service District to contact any of my former employers and/or the persons or organizations referenced in this application concerning my previous employment, education, service, or any other information they might have with regard to the subjects covered by this application. I further authorize my former employers and/or persons or organizations referenced in this application to disclose to Timpanogos Special Service District, any and all letters, reports or other information concerning my previous employment, education, service, or any other information they might have with regard to the subjects covered by this application. I hereby release Timpanogos Special Service District, my former employers, and other persons or organizations from any and all claims, demands, and liabilities arising or which may result from furnishing such information to Timpanogos Special Service District.

I understand that Timpanogos Special Service District is subject to and shall comply with the Immigration Reform and Control Act of 1986, as amended. I understand as a condition of employment that I will be required to provide legal proof of authorization to work in the United States. I understand that Timpanogos Special Service District participates in the federal Employment Eligibility Verification Program (E-Verify), and that if hired, my continued employment will be contingent upon confirmation of my employment eligibility through the E-Verify system.

I understand that this is a preliminary application for employment and that no contract for employment is created hereby. If I am hired, I understand I am free to resign at any time, with or without cause and with or without notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and with or without prior notice, except as may be required by law.

I understand that Timpanogos Special Service District has a drug and alcohol policy and that I will be subject to pre-employment, random, reasonable suspicion, and other authorized drug and/or alcohol testing as a condition of employment in accordance with District policies. I hereby authorize Timpanogos Special Service District to conduct a pre-employment drug screen if I am presented with a job offer. I also agree to allow the District to determine my competence and qualification for certain positions by obtaining credit, criminal, driver license, and other job-related information about me. I understand that if such checks are involved, I may be informed of their contents by submitting a written request, and that I have a right to respond to any findings which I believe to be incorrect.

_____ Date: _____

Signature of Applicant

If this application has been completed by an individual other than the above applicant, please print name here:

_____

PLEASE RETURN COMPLETED APPLICATION TO:

Timpanogos Special Service District
Attention: Human Resources
Site Address:
6400 North 5050 West
Utah County, Utah 84003
Mailing Address:
P.O. Box 923
American Fork, Utah 84003