

**LAWRENCE COUNTY REGIONAL WATER DISTRICT
APPLICATION FOR EMPLOYMENT**

DATE: _____

NAME: _____ SS# _____

ADDRESS _____

CITY _____ ST _____ ZIP _____ PHONE _____

DATE OF BIRTH _____ SINGLE, MARRIED, OR OTHER _____

EDUCATION

ELEMENTARY SCHOOL _____ HIGH SCHOOL _____ GRADUATE YES OR NO

VO-TECH _____ COLLEGE _____ GRADUATE YES OR NO

REASON FOR APPLYING FOR THIS JOB? _____

REFERENCES

1. NAME _____ PHONE _____

2. NAME _____ PHONE _____

3. NAME _____ PHONE _____

EMPLOYMENT HISTORY

1. NAME _____

ADDRESS _____

DATE STARTED _____ DATE ENDED _____

STARTING PAY _____ ENDING PAY _____

REASON FOR LEAVING _____

2. NAME _____

ADDRESS _____

DATE STARTED _____ DATE ENDED _____

STARTING PAY _____ ENDING PAY _____

REASON FOR LEAVING _____

ALL APPLICANTS MUST TAKE A DRUG TEST

