



## FORMER EMPLOYERS

**List below your last 10 years of experience, starting with the most recent**

Employer/Organization:	From:	To:
Type of Business:		
Address:		
Supervisor's Name & Title:		Phone:
Reason for leaving or desiring to leave:		
State if you resigned, were discharged or asked to resign:		
Job Title:		
Description of duties (be specific):		
May we contact your current employer?		

Employer/Organization:	From:	To:
Type of Business:		
Address:		
Supervisor's Name & Title:		Phone:
Reason for leaving or desiring to leave:		
State if you resigned, were discharged or asked to resign:		
Job Title:		
Description of duties (be specific):		
May we contact this employer?		

Employer/Organization:	From:	To:
Type of Business:		
Address:		
Supervisor's Name & Title:		Phone:
Reason for leaving or desiring to leave:		
State if you resigned, were discharged or asked to resign:		
Job Title:		
Description of duties (be specific):		
May we contact this employer?		

Employer/Organization:	From:	To:
Type of Business:		
Address:		
Supervisor's Name & Title:		Phone:
Reason for leaving or desiring to leave:		
State if you resigned, were discharged or asked to resign:		
Job Title:		
Description of duties (be specific):		
May we contact this employer?		

**PROFESSIONAL OR TECHNICAL REGISTRATION(S) OR LICENSE(S) OR CERTIFICATE(S)**

Description	Certification Number	Certification State

**SKILLS, EDUCATION, TRAINING DATA**

List any skills applicable to position applied for	Typing Speed	Dictation Speed

**SCHOOL AND COMMUNITY ACTIVITIES**

List any Honors Received, Scholarships, Offices Held

**OTHER NAME(S) UNDER WHICH SCHOOL OR EMPLOYMENT RECORDS ARE KEPT**

List any other name(s) under which records are kept

**REFERENCES**

Give names of three persons not related to you whom you have known for at least five years.

Name	Address	Day Time Telephone	Years Acquainted

**PERIODS OF UNEMPLOYMENT**

Please list any period of unemployment during the past ten years.

FROM	TO

## SUPPLEMENTAL INFORMATION

Are you able to perform the essential function of the job for which you are applying?

If no, describe the function that cannot be performed:

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

Many of our customers (clients) do not speak English. Do you speak, write or understand any foreign language(s)?

If yes, which language(s):

### Please Read Each Paragraph Carefully and Check the Box Below

1. 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.

2. I hereby authorize the District to thoroughly investigate my references, work record, criminal convictions, education and other matters related to my suitability for employment and, further, authorize the references I have listed to disclose to the District 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 District, 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.

3. I understand that my employment with the District may depend upon insurability that my driving record will be checked with the Department of Motor Vehicles and, if unacceptable to the District's liability carrier, I would be terminated. Maintaining a valid California drivers license during employment is required for most District positions.

4. 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 District. 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 District, and that no promises or representations contrary to the foregoing are binding on the District unless made in writing and signed by me and the District designated representative or authorized by the Board of Directors or the General Manager.

5. I understand that Vista Irrigation District's Human Resources Department uses electronic mail (e-mail) to notify applicants of important information relating to the status and processing of employment application. The District does so as part of its ongoing efforts to increase operational efficiency, promote the conservation of natural resources, and minimize costs. When submitting an application:

A. Ensure that the e-mail address and contact information you provide is current, secure, and readily accessible to you. Spam or other filters may need to be adjusted to accept e-mails from the District. The District is not responsible for any e-mail that it sends that is not received at the e-mail address provided (e.g. non-delivery, blocked, etc.).

B. Read any notices that the District sends carefully and in a timely manner. Follow further instructions, if any. The District recommends that you retain a copy of notices for your records.

Please check the box to the left to approve that you have read and understand each acknowledgement listed above.

Date:

Applicant's Digital Signature



## APPLICANT TRACKING SHEET

Completion of this form is voluntary. The data will be used for research and statistical reporting purposes and in no way affects any individual employment decision. In accordance with law, the form will be separated from your application immediately upon receipt, and the information provided will not be made available to any of the personnel involved in the hiring decision. Your cooperation in answering the questions completely and accurately is appreciated.

Last Name	First	MI	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Position Applied For:

Sex:

Birth Date:

### ETHNIC GROUP (CHECK ONE):

- White (Not of Hispanic origin-includes Indo-European, Pakistani and East Indian)
- Black (Includes African-American, African, Jamaican, Trinidadian, and West Indian)
- Hispanic (Includes Mexican, Puerto Rican, Cuban, Central or South American and Spanish)
- Asian or Pacific Islander (Includes persons of the Far East, Asia, the Indian subcontinent and surrounding regions, Philippine or Malay archipelagos, or other Pacific Islands)
- American Indian or Alaskan Native (Includes persons who identify themselves or are known as such by virtue of tribal association or are Aleuts or Eskimos.)

### DISABILITY STATUS (If applicable, please check appropriate box)

- Visual Impairment
- Hearing Impairment
- Speech Impairment
- Physical Disability
- Emotional or Psychological Impairment
- Developmental Disability
- Other, please specify

(Please note: If you are disabled and you need reasonable accommodation(s) to assist in the hiring process, please include your daytime phone number on space provided below. Someone will contact you and discuss you requirements.

Phone Number (including area code):



## METER READER TRAINEE SUPPLEMENTAL QUESTIONNAIRE

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Please read carefully and fully complete the attached supplemental questionnaire. Failure to complete the supplemental questionnaire by not answering all questions will result in your disqualification for employment.

1. For each of the items listed below, please indicate your degree of experience.

### Level of Experience

a. Basic map reading

b. Basic mathematical principles

c. Respond to requests and inquires from public

d. General familiarity with construction tools

e. Walk for long distances with regular stooping and bending

2. What experience do you have in walking 20 to 40 miles per week on difficult terrain and in varied weather conditions?

3. What experience do you have working with basic hand tools?



**METER READER TRAINEE SUPPLEMENTAL QUESTIONNAIRE**

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4. Please describe your experience in dealing with difficult customers.

5. Please describe your experience working in environments that might include unfriendly dogs, insects, or reptiles.

6. Describe the job in which you worked most independently. Where was it? How long did you work there?



## APPLICANT INSTRUCTIONS

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**To insure that your application will be processed, please completely read and follow the directions provided below.**

- \* Applications are accepted only for current open positions. For a list of currently open positions, please check our web site at [www.vidwater.org](http://www.vidwater.org).
- \* Only completed applications will be accepted. Incomplete or late applications will not be considered for processing.
- \* Applications, with all required supplemental information, must be received by the date of the job deadline. All applications received after the deadline will not be considered.
- \* All applicants must submit this employment application to be considered for any open position. Resumes may be accepted in addition to this application but not in place of. All supplemental information requested must also be submitted as required by the job openings. Be sure to check our web site for a complete list of all additional materials that must accompany this application.
- \* Applicants must submit a separate application for each job opening being applied for.
- \* Complete the entire application filling in all information completely and accurately. If the requested information does not apply to you please enter "N/A" to specify "**Not Applicable**" in the available space.
- \* Applications sent electronically will need to have a digital signature provided on the application before continuing in the process.
- \* Additional information, if necessary, can be included using a separate sheet of paper (for printed submissions) or can be sent as an additional attachment with the application.
- \* Completion of the Applicant Tracking sheet is voluntary. The data will be used for research and statistical reporting purposes only and in no way affects any individual employment decision.
- \* Be sure to read, check, and sign your application in the area provided.
- \* Review your application carefully and retain a copy for your records.
- \* Submit your completed application using either method listed below:
  - 1) A printed copy of your application, with the supplemental information requested, can be delivered in person or by mail to the District main office at: 1391 Engineer Street, Vista, CA 92081.
  - 2) An electronic copy of this completed application can be submitted to our automated system via e-mail. Use the e-mail button on this form or simply e-mail this form to [jobapps@vidwater.org](mailto:jobapps@vidwater.org). Also be sure to attach any supplemental information required with your e-mail submission. It is suggested that you use this system to expedite processing of your application.
- \* For more information, please see our Frequently Asked Questions page available from our web site at [www.vidwater.org](http://www.vidwater.org) under the employment page.