## JOB APPLICATION

## Snowmass Water and Sanitation District PO Box 5700, Snowmass Village, Colorado 81615 970-923-2056

Snowmass Water And Sanitation District is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact a company representative.

Please fill out all of the sections below: Applicant Information **Applicant Name:** Address: City, State and Zip Code: Telephone Number: Email Address: Date of Application: **Employment Position** Position(s) applying for: How did you hear about this position? On what date can you start working if you are hired? **Personal Information** Are you a U.S. citizen or approved to work in the United States? Yes No What document can you provide as proof of citizenship or legal status? Job Skills/Qualifications Please list below the skills and qualifications you possess for the position for which you are applying:

(Note: Snowmass Water and Sanitation District complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

## **Education and Training**

**High School** Name Location (City, State) Year Graduated Degree Earned College/University Name Location (City, State) Year Graduated Degree Earned **Vocational School/Specialized Training** Name Location (City, State) Year Graduated Degree Earned Military: Are you a member of the Armed Services? What branch of the military did you enlist? What was your military rank when discharged? How many years did you serve in the military? What military skills do you possess that would be an asset for this position? **Previous Employment Employer Name:** Job Title: Supervisor Name: **Employer Address:** City, State and Zip Code: Employer Telephone: Dates Employed: Reason for leaving: **Employer Name:** Job Title: Supervisor Name: **Employer Address:** City, State and Zip Code: Employer Telephone: Dates Employed: Reason for leaving: **Employer Name:** Job Title: Supervisor Name: **Employer Address:** 

City, State and Zip Code:	
Employer Telephone: Dates Employed: Reason for leaving:	
"employment at will." This means the with or without cause, with or without representative of Snowmass Water contrary to the foregoing "employment will," and that you acknowledge the employment can alter your at-will employment.	the Snowmass Water and Sanitation District is referred to as at your employment can be terminated at any time for any reason, notice, by you or the Snowmass Water and Sanitation District. No and Sanitation District has authority to enter into any agreement at will" relationship. You understand that your employment is "at to oral or written statements or representations regarding your apployment status, except for a written statement signed by you and Chief Operations Officer or the Company's President.
Applicant Signature:	Dated: