

Bryan County Rural Water Dist. #5
22404 State Road 78S
Durant, OK 74701
580-924-8235

Date _____

Name _____
Last First Middle Maiden

Present Address _____
Number Street City State Zip

How Long _____ Social Security No. _____

Telephone _____ If under 18, please list age _____

Position applied for _____

Days available to work
 No Pref _____ Thur _____
 Mon _____ Fri _____
 Tues _____ Sat _____
 Wed _____ Sun _____

Salary Desired _____

How many hours can you work weekly? _____

Can you work nights? _____

Employment desired (please circle) Full-Time Only Part-Time Only Full or Part Time

When available for work? _____

Have you ever been convicted of a crime? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s) how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

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Type of School	Name of School	Location	Yrs Completed	Major/Degree
High School				
College				
Bus. Or Trade School				
Professional School				

Do you have a Driver's License? Yes No

What is your means of transportation to and from work? _____

Driver's License Number _____ State _____
 Exp date _____ Type of License _____

Have you had any accidents during the past three years? _____ How many? _____

Have you had any moving violations during the past three years? _____ How many? _____

OFFICE ONLY			
Typing	yes	no	_____ WPM
Personal Computer	yes	no	
10-Key	yes	no	
word processing	yes	no	
Other Skills	_____		



Bryan County RWD #5 is an Equal Opportunity Provider and Employer. In accordance with Federal law and the U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age religion, disability and familial status. (Not all prohibited basis apply to all programs.) To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W. Washington, D.C. 20250-9410 or call (800) 795-3272 (voice) or (202) 720-6382 (TDD).

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Please list two references other than relatives or previous employers.

Name _____
Position _____
Company _____
Address _____

Telephone _____

Name _____
Position _____
Company _____
Address _____

Telephone _____

An application form sometimes makes it difficult for an individual to adequately summarize a complete background. Use the space below to summarize any additional information necessary to describe your full qualifications for the specific position for which you are applying.



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	Military	
Have you ever been in the Armed Forces?	Yes	No
Are you now a member of the National Guard?	Yes	No
Specialty _____		
Date Entered _____		
Discharge Date _____		

Work Experience Please list your work experience for the past five years beginning with you most recent job held. If you were self-employed, give firm name. Attach additional sheets if necessary.			
Name of Employer Address City, State, and Zip Phone number	Name of last Supervisor	Employment Date	Salary
		From:	
		To:	
Last job title			
Reason for leaving (be specific)			
List the jobs you held, duties performed, skills used or learned, advancements or promotions while you worked at this company.			



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		From:	
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Last job title			
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May we contact your present employer? Yes No

Did you complete this application yourself Yes No

If not, who did? _____

APPLICATION FORM WAIVER

In exchange for the consideration for my job application by Bryan County Rural Water District #5, I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of employment relationship, either in the position applied for or any other position, and regardless of the contents of employee handbooks, personnel manuals, benefit plans, policy statements, and the like as they may exist from time to time, or other Company practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain an employee of Bryan County Rural Water District #5, or otherwise to change in any respect the employment-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the President/General Manager of the company. Both the undersigned and Bryan County Rural Water District #5 may end the employment relationship at any time, without specified notice or reason. If employed, I understand that the Company may unilaterally change or revise their benefits, policies and procedures and such changes may include reduction in benefits.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without previous notice. I hereby give the Company permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Company from any liability as a result of such contact.

I also understand that (1) the Company has a drug and alcohol policy that provides for pre employment testing as well as testing after employment; (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I understand that, in connection with the routine processing of your employment application, the Company may request from a consumer reporting agency an investigative consumer report including information as to my credit reports, character, general reputation, personal characteristics, and mode of living. Upon written request from me, the Company, will provide me with additional information concerning the nature and scope of any such report requested by it, as required by the Fair Credit Reporting Act.



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I further understand that my employment with the Company shall be probationary for a period of ninety (90) days, and further that at any time during the probationary period or thereafter, my employment relation with the Company is terminable at will for any reason by either party.

Signature of Applicant _____ Date _____

Thank you for completing this application form and for your interest in our business.



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