



Buckingham Park Water District
2880 Eastlake Drive · Kelseyville, CA 95451
Phone (707) 279-8568 · Fax (707) 279-2947

Employment Application

Instructions: All applications for examination must be submitted typed or in ink on this Buckingham Park Water District standard application form and returned to the District Office or postmarked no later than the final filing date. A separate application must be submitted for each recruitment. The application form must be completed in sufficient detail to allow comprehensive review and evaluation. Acceptability for any examination is based on the information in this application. An application completed in insufficient detail, without signature or in pencil will constitute failure of the initial step of the examination process and the application will be placed in our inactive files. The application and attachment, once submitted cannot be returned. It is your responsibility to notify the Personnel Department of any change of address. Buckingham Park Water District is an Equal Opportunity-Affirmative Action Employer providing equal employment opportunity to all regardless of sex, race, color, religion, ancestry, national origin, age, marital status, medical condition (cancer related), or physical handicap.

1. Title of position: _____ 2. Your Social Security Number: _____
(For identification purposes only)
3. Name: _____
(Last) (First) (Middle)
4. Mailing Address: _____
(Number & Street) (City & State) (Zip)
- Physical Address: _____
(Number & Street) (City & State) (Zip)
5. Telephone Number: Home: _____ Business: _____
May we contact you at your business number? Yes No
6. Can you, after employment, submit verification of your legal right to work in the United States? Yes No
7. Do you have prior military service? Yes No Branch: _____ Dates _____
8. Are you now employed or have you ever been employed by Buckingham Park Water District? Yes No
If yes, indicate department, title and dates of employment:

9. Do you have a valid California driver's license? Yes No Class: _____ Number: _____
10. Indicate the type of position(s) you will accept: Full-time permanent position (40 hours per week)
Part-time permanent position (less than 40 hours per week) Extra-help position (hours per week will vary)
11. May we contact your present employer? Yes No
12. **EDUCATION:**
Did you graduate from high school? Yes No Name of High School: _____
If "NO", circle highest year you completed: **1 2 3 4 5 6 7 8 9 10 11 12**
If "NO" did you receive a GED? Yes No
Name and Location of College or University: _____
Semester Units Completed: _____ Major: _____ Minor: _____
Degree or Certification: Yes No Date: _____
Name and Locations of Business, Correspondence or Trade Schools:

Semester Units Completed: _____ Major: _____ Minor: _____
Degree or Certification: Yes No Date: _____



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Name and Locations of Business, Correspondence or Trade Schools:

Semester Units Completed: _____ Major _____ Minor _____

Degree or Certification: Yes No Date: _____

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Semester Units Completed: _____ Major _____ Minor _____

Degree or Certification: Yes No Date: _____

If the minimum qualifications of the position for which you are applying include formal education (a high school diploma/GED), specific college course, a college degree, etc.) you must submit along with your completed application form evidence that you have such education i.e., a copy of your diploma or degree or other certification from your school. If the position for which you are applying requires a special license or certificate, you must submit with your completed application form evidence that you have such license(s) and/or certificate(s).

13. Do you speak any languages other than English? Yes No If yes, please list _____

14. If this position requires a specific license or certificate, please complete the following:

State Certification License or
 Water Treatment, or Other: _____ Registration No.: _____ Expiration Date: _____

State Certification License or
 Distribution System, or Other: _____ Registration No.: _____ Expiration Date: _____

15. References: Give names, profession and telephone number, of three people whom we may contact, other than relatives, who have knowledge of your skills, experience and ability.

NAME	PROFESSION	TELEPHONE NUMBER
_____	_____	_____
_____	_____	_____
_____	_____	_____

16. **EXPERIENCE:** List the positions you have held including relevant volunteer experience. If you were employed under another name, write in the name by which you were known to your employer. If additional space is needed, attach a sheet of paper.

Employer's Name: _____ Type of Business: _____

Address: _____ Phone: _____

From: _____ / _____ Title: _____
 Month Year

To: _____ / _____ Duties: _____
 Month Year

Salary: _____ Number of Persons Supervised: _____

Supervisor's Name: _____ Reason for Leaving: _____



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Address: _____ Phone: _____

From: _____ / _____ Title: _____
Month Year

To: _____ / _____ Duties: _____
Month Year

Salary: _____ Number of Persons Supervised: _____

Supervisor's Name: _____ Reason for Leaving: _____

Employer's Name: _____ Type of Business: _____

Address: _____ Phone: _____

From: _____ / _____ Title: _____
Month Year

To: _____ / _____ Duties: _____
Month Year

Salary: _____ Number of Persons Supervised: _____

Supervisor's Name: _____ Reason for Leaving: _____

Employer's Name: _____ Type of Business: _____

Address: _____ Phone: _____

From: _____ / _____ Title: _____
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17. ADDITIONAL COMMENTS:

(Elaborate on why Buckingham Park Water District should consider you as a candidate for employment.)

Please attach any additional information to your application which you feel will help us in our evaluation of your qualifications. Before you return your application to us, please check it to make sure that it is correct and complete. Thank you for your interest in employment with Buckingham Park Water District.

ADDITIONAL INFORMATION:

READ THIS STATEMENT BEFORE SIGNING: I hereby certify that all statements made on or in connection with this application are true to the best of my knowledge. I understand that false statements or failure to meet legal minimum qualifications for this position will be sufficient cause to eliminate me from the examination or dismiss me from employment understand that if I am offered employment a pre-employment medical examination will be required. I will provide: Buckingham Park Water District vital statistics information as may be required.

Signature: _____

Date: _____

All applicants meeting the minimum qualifications are not guaranteed advancement through any subsequent phase of the recruitment, or placement on the eligibility list.

