

## Employment Application



GLSWA does not discriminate in employment on the basis of religion, race, color, national origin, age, sex, marital status, height, weight, arrest record, handicap or disability. This application will be given every consideration, but its receipt does not mean that the applicant will be interviewed or employed.

INSTRUCTIONS: Please answer all questions. If a question does not apply to you, please write N/A (Not Applicable) in the appropriate box. Use Ink and Print clearly. All applications should be dropped off at the office or e-mailed to [crumbj@glswa.org](mailto:crumbj@glswa.org).

8/2022

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date Available: \_\_\_\_\_ Position Applied for: \_\_\_\_\_ Desired Salary: \$ \_\_\_\_\_

Are you a citizen of the United States? YES  NO  If no, are you authorized to work in the U.S.? YES  NO

Have you ever been convicted of a felony? YES  NO  If yes, explain: \_\_\_\_\_

### Education & Training

High School: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Diploma: \_\_\_\_\_

College: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

Other: \_\_\_\_\_ Address: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Did you graduate? YES  NO  Degree: \_\_\_\_\_

I am licensed or certified in Michigan as a \_\_\_\_\_

List machines and/or equipment which you can operate: \_\_\_\_\_

### Military Service

Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Rank at Discharge: \_\_\_\_\_ Type of Discharge: \_\_\_\_\_

If other than honorable, explain: \_\_\_\_\_

## References

Please list three professional references.

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company: \_\_\_\_\_ Location: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company: \_\_\_\_\_ Location: \_\_\_\_\_  
Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Company: \_\_\_\_\_ Location: \_\_\_\_\_

## Previous Employment

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Job Duties: \_\_\_\_\_ From: \$ \_\_\_\_\_ To: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
  Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Job Duties: \_\_\_\_\_ From: \$ \_\_\_\_\_ To: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
  Reason for Leaving: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Job Duties: \_\_\_\_\_ From: \$ \_\_\_\_\_ To: \_\_\_\_\_  
May we contact your previous supervisor for a reference? YES NO  
  Reason for Leaving: \_\_\_\_\_

## Disclaimer and Signature

PLEASE READ CAREFULLY BEFORE SIGNING. If you have any questions regarding the following statement or any questions contained in this application, please ask prior to signing.

The information on this application is true and accurate to the best of my knowledge. I understand that my references and past work history are subject to check and that any misleading, incorrect, or incomplete statements may render my application void or become cause for discharge, if I am employed. I understand that employment with the Gull Lake Sewer & Water Authority will be contingent upon the results of a drug test, physical examination and background investigation, if applicable. I also understand that, if I am employed, I may be terminated at any time, with or without cause.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_