

THE EMPLOYMENT APPLICATION INSTRUCTIONS

A fully *completed, signed employment application is required* before you can be considered for employment. Other documents may be attached but cannot be substituted for requested information. If your application is not fully completed it will be returned. The completion of this application, and any other documents you prepare and submit, represents your ability to provide written communication.

Applications will be accepted for current openings only. A separate application will be required for each position for which you are applying and will not be accepted for subsequent openings of the same title.

Your completed application is the primary source of information for managers making selection decisions. You are encouraged to state your employment interests fully and provide the information requested to the best of your ability.

PUBLIC UTILITY DISTRICT NO. 2 OF GRANT COUNTY

Public Utility District No. 2 of Grant County is a publicly owned electric utility whose primary responsibility is to provide its customer/owners with the best possible, reliable electric service at the lowest reasonable cost, in an environmentally responsible manner, consistent with sound business principles.

The District's mission is carried out by a locally elected Board of Commissioners who establish policies and set rates and a Manager and staff who operate and manage the District's business consistent with those policies.

The District considers qualified applicants for each type of opening. The applicant most suited for the opening is selected. The District practices equal opportunity within the framework of its mission.

3. EMPLOYMENT RECORD

List all employment starting with the present or most recent. Include self-employment and military service. **Attach additional sheets if necessary.** A resume alone is not sufficient in lieu of the following section. This application must be filled out completely for employment consideration, or it will be returned for completion.

WE CONDUCT REFERENCE CHECKS DIRECTLY FROM THIS INFORMATION.

Employer Name		Phone	EMPLOYED			
			FROM:		TO:	
			Full-time		Part-time	
Address (Street and P. O. Box)			Mo.	Yr.	Mo.	Yr.
City	State	Zip	SALARY			
			START		END	
Job Title	Immediate Supervisor		\$		\$	
Primary Responsibilities						
Reason for Leaving						VOLUNTARY / DISCHARGED

Employer Name		Phone	EMPLOYED			
			FROM:		TO:	
			Full-time		Part-time	
Address (Street and P. O. Box)			Mo.	Yr.	Mo.	Yr.
City	State	Zip	SALARY			
			START		END	
Job Title	Immediate Supervisor		\$		\$	
Primary Responsibilities						
Reason for Leaving						VOLUNTARY / DISCHARGED

Employer Name		Phone	EMPLOYED			
			FROM:		TO:	
			Full-time		Part-time	
Address (Street and P. O. Box)			Mo.	Yr.	Mo.	Yr.
City	State	Zip	SALARY			
			START		END	
Job Title	Immediate Supervisor		\$		\$	
Primary Responsibilities						
Reason for Leaving						VOLUNTARY / DISCHARGED

Employer Name		Phone	EMPLOYED			
			FROM:		TO:	
			Full-time		Part-time	
Address (Street and P. O. Box)			Mo.	Yr.	Mo.	Yr.
City	State	Zip	SALARY: START			
			END			
Job Title	Immediate Supervisor		\$		\$	
Primary Responsibilities						
Reason for Leaving						VOLUNTARY / DISCHARGED

9. ADDITIONAL INFORMATION

Use the space **below** to provide any additional information you desire.

10. HIRING AGREEMENT

IMPORTANT: BEFORE SIGNING, READ AND CHECK THIS APPLICATION CAREFULLY FOR COMPLETENESS.

I hereby give Public Utility District No. 2 of Grant County and their recruitment agent the right to make a thorough investigation of my present and/or past employment, education, and activities. I release from all liability all persons, companies, and corporations supplying such information. I indemnify and hold harmless Public Utility District No. 2 of Grant County and their recruitment agent against any liability, which might result from making such investigation. I understand that any false answer or statements on this form or on other required documents may result in denial of employment or discharge.

Additionally, I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between Public Utility District No. 2 of Grant County and myself for any term of employment or employment benefit or procedure. No promises regarding employment have been made to me and I understand that no such promise or guarantee is binding upon Public Utility District No. 2 of Grant County unless made in writing. I further understand that no agent or representative other than the Manager of Public Utility District No. 2 of Grant County has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

I agree that should an offer of employment be extended to me, this offer will be contingent on passing a physical examination. I further agree to submit to a pre-employment drug screening and recognize that employment is contingent upon satisfactory results.

I recognize that this application will be considered for the opening for which I applied. If I wish to be considered for other employment, I will complete a new application.

Signature: _____ Date: _____

A resume may be submitted to expand upon your qualifications, education, and work history. However, all questions on the application must be answered in order for you to be considered for employment.

LAST NAME _____ **FIRST NAME** _____ **DATE** _____
Pos. No. _____

CONFIDENTIAL APPLICANT LOG

The Public Utility District No. 2 of Grant County is required by federal law to gather and maintain statistical data on all applicants for employment. The District will use all questions appearing on this form for statistical purposes only. Your response is strictly voluntary. This form is to be separated from the application form and will not become a part of the pre-employment process and, if employed, it will not appear in your personal file.

It is the policy of the Public Utility District No. 2 of Grant County to provide equal opportunity to all applicants for employment. Further, it is the District's policy not to discriminate in the recruitment, hiring, compensation, promotion, transfer, training, benefits, down grading, termination, lay-off, recall, education, tuition assistance, social and recreational programs of any person based upon race, religion, color, national origin, age, sex, marital status, creed, veteran status, sensory, mental or physical handicap (unless based upon a bona fide occupational qualification).

**The following information is used for voluntary or affirmative actions efforts. We invite you to furnish the information on a voluntary basis.
 Your refusal to provide it WILL NOT subject you to any adverse treatment. This information will be kept confidential.**

I DO NOT wish to answer any of these questions.

Today's Date			Name (Print or Type same as on Social Security Card)			Gender	Date of Birth			VETERAN STATUS	
Month	Day	Year	Last	First	Middle	<input type="checkbox"/> M <input type="checkbox"/> F	Month	Day	Year	Are you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
										What era?	
ETHNIC BACKGROUND			Eligibility to Work							Are you a disabled veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>	White (not of Hispanic origin): Persons having origins in any of the original people of Europe, North Africa, or the Middle East.		If hired, you will be asked to provide documentation to show that you are eligible to work in the United States.								
<input type="checkbox"/>	Black (not of Hispanic Origin): All persons having origins in any of the black racial groups of Africa.										
<input type="checkbox"/>	Asian or Pacific Islander: All persons having origins in any of the original people of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. For example, China, Japan, Korea, the Philippine Islands, and Samoa.		Check box if you need special disability related accommodations for interviews and testing								
<input type="checkbox"/> American Indian or Alaskan Native: All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition. <input type="checkbox"/> Hispanic: All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.			This application is in response to which of the following:			5. Private Employment Agency: <input type="checkbox"/>			POSITION APPLIED FOR:		
			1. Newspaper: <input type="checkbox"/>			6. Walk In: <input type="checkbox"/>					
			2. Trade Publication: <input type="checkbox"/>			7. Other: (Specify)					
			3. Current PUD Employee: If so, Name:								
4. Washington State Employment Agency <input type="checkbox"/>											