



**SAN ELIJO JOINT POWERS AUTHORITY**  
**San Elijo Water Reclamation Facility**  
**2695 Manchester Avenue**  
**Cardiff, California 92007**

(760) 753-6203  
 (760) 753-5935 FAX

## APPLICATION FOR EMPLOYMENT

RESUMES WILL NOT BE ACCEPTED IN PLACE OF A COMPLETED APPLICATION

### IMPORTANT: FOLLOW THESE INSTRUCTIONS EXACTLY

Read the Job Description thoroughly. Answer all questions completely. Use ink or typewriter. Any false statement or material omission is cause for rejection, removal from eligibility list or discharge from employment.

Avoid any reference to religion, politics, race or membership in social or fraternal groups. Exclude any information that will indicate your race, religious creed, national origin, ancestry, sex, physical condition or any other bases prohibited by law.

### POSITION - Give exact title as listed on the job bulletin:

#### NAME:

\_\_\_\_\_

Last

First

Middle

#### Address:

\_\_\_\_\_

Number

Street

Apt. #

City

State

Zip Code

#### Telephone:

\_\_\_\_\_

Home

Business/Msg Phone

\_\_\_\_\_

e-mail

May we contact you at work?    Yes    No    Have you previously applied for a position with the SEJPA?    Yes    No    If so, when?

### CERTIFICATES:    Title of license, certificates or other credentials. Check job bulletin for requirements.

1

\_\_\_\_\_

Name

Expiration Date

2

\_\_\_\_\_

Name

Expiration Date

3

\_\_\_\_\_

Name

Expiration Date

4

\_\_\_\_\_

Name

Expiration Date

### EDUCATION    Check if you possess one of the following:

High School Diploma

G.E.D. Certificate

CA High School Proficiency Certificate

Highest grade completed: \_\_\_\_\_

College: \_\_\_\_\_ Post Graduate Work: \_\_\_\_\_ Years

Name and Address of College, University, Vocational School or Institute	Major or Course Study	Attendance Dates	Degree Earned

1 Do you possess a valid California driver license?    Yes    No    License # \_\_\_\_\_

2 Can you, after employment, submit verification of your legal right to work in the United States?    Yes    No

**San Elijo Joint Powers Authority  
Application for Employment**

**EMPLOYMENT HISTORY**

List your most recent employment first.

List all experience, paid or voluntary, related to the position.

A resume or additional supplementary information may also be attached.

<b>EMPLOYER</b>		<b>Name:</b>	
		<b>Address:</b>	
		<b>Dates Employed</b>	<b>Job Title and Description of Duties</b>
		Mo	Yr
From			
To			
Total Months:			
Hrs Per Wk:	Supervisor's Name/Title _____		
	Reason For Leaving _____		
	May we contact this employer? _____		

<b>EMPLOYER</b>		<b>Name:</b>	
		<b>Address:</b>	
		<b>Dates Employed</b>	<b>Job Title and Description of Duties</b>
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		Mo	Yr
From			
To			
Total Months:			
Hrs Per Wk:	Supervisor's Name/Title _____		
	Reason For Leaving _____		
	May we contact this employer? _____		

Where/how did you learn about this job opening? \_\_\_\_\_

**CERTIFICATE OF APPLICANT** (Read carefully before signing)

I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained in this application. I understand that any misstatement or omission of material fact on this application will cause forfeiture on my part of all rights of employment. I further agree to submit to a complete medical examination and to furnish proof of citizenship as may be required.

I further agree that my employment and compensation can be terminated at will, with or without cause, and with or without notice, at any time, either at my option or at the option of San Elijo.

**X**

Signature

Date