## WAUKESHAWATER UTILITY TO: APPLICANTS FOR <u>ACCOUNTING ASSISTANT</u>

(February, 2024)

A job application for the Operator I is attached. The 2024 hourly pay range is \$30.00 (bottom) - \$35.00 (midpoint). Starting rate will depend upon qualifications and experience. After reading the job description, you are encouraged to use this sheet to briefly describe how your ability, education, and past experience will help you to successfully perform these duties. A resume may be used to supplement the information which you provide here, but will not be accepted as a substitute. Please use one sheet only.



## WAUKESHA WATER UTILITY

P.O. BOX 1648, Waukesha, WI 53187-1648 (mail) 115 Delafield Street, Waukesha, WI 53188-3615 (street)

## **Employment Application**

We are an Equal Opportunity Employer

You must complete entire application and sign where indicated. You may type-in or print out and write in.

Date:					
Applicant Information					
Name (first, middle, last)					
Address (street, city, state, zip code)	Mobile Telephone				
Email Address:	Home Telephone				
Are there other names under which you have worked or attended Yes No school? If yes, please list for reference checking purposes.					
Are you legally authorized to work in the U.S.? Yes No (If hired, you will be required to provide proof of work authorization.)					
Are you at least 18 years old? Yes No If not, your employment will be subject to verification that you meet state/federal minimum age re you are applying for and have obtained a valid work permit.	quirements for the type of work				
Have you ever been convicted of a crime or pleaded no contest for any offense or violation other tha Yes No If Yes, explain: 1) nature of crime, 2) date of conviction, and 3) state in which convi automatic bar to employment.)					
Do you have any pending criminal charges against you? Yes No If Yes, describe the 1) nature of the charges, 2) date issued, and 3) county and state where issued.					
Have you ever applied at this company before?Have you ever worked at this	you ever worked at this company before?				
Yes No If yes, when:	n:				
Position Applying For   Part-Time or Full-Time Desired   Salary Preference	Shift Preference				
When can you start?					
How were you referred to the company? Agency Website Friend/Relative   Social Media School Other					
1. If relevant, please describe computer proficiency, software knowledge, and office equipment experience.					
2. If relevant, please describe experience using machines and equipment.					

Education						
School	Name & Location state)		er of Years tended	Major subjects	Diploma or Degree Received	
High School					Yes No	
College					Yes No	
Graduate					Yes No	
Other (specify)					Yes No	
Training Courses						
List any relevant training p	programs completed.					
Course/Seminar	Organization Sponsoring		Content		Date(s) Attended	
Required License(s)						
If required to drive a moto	or vehicle for the job	applying for, state	your:			
1) driver's license number			2) state issued			
Are you licensed with any group, association or society relating to the job for which you are applying? 🗌 Yes 🗌 No						
Registration or License Nu	mber St	tate Issued		Expiration Date		
Employment History	(start with most r	recent; use sepa	arate sheet if	necessary)		
			Telephone			
Address:			·			
Job Title:			Employment	Employment Dates (month and year)		
Name of Immediate Supervisor:		From:	1	-o:		
Description of Duties:						
Salary (start): Salary (end): Reason for Leaving:						
If currently employed, ma	y we contact as a refe	erence? 🗌 Yes	No			

Name of Employer:	Telephone	
Address:		
Job Title:	Employment Dates (month and year)	
Name of Immediate Supervisor:	From: To:	
Description of Duties:		
Salary (start): Salary (end):	Reason for Leaving:	
Name of Employer:	Telephone	
Address:		
Job Title:	Employment Dates (month and year)	
Name of Immediate Supervisor:	From: To:	
Description of Duties:		
Salary (start): Salary (end):	Reason for Leaving:	
Name of Employer:	Telephone	
Address:		
Job Title:	Employment Dates (month and year)	
Name of Immediate Supervisor:	rom: To:	
Description of Duties:		
Salary (start): Salary (end):	Reason for Leaving:	
Employment References		
List individuals familiar with your job qualifications (no relatives or	personal friends).	
Name:	Telephone	
	Email Address:	
Relationship:	How long known?	
Name:	Telephone	
	Email Address:	
Relationship:	How long known?	
Name:	Telephone	
	Email Address:	
Relationship:	How long known?	

## Please Read Carefully Before Signing This Form

- 1. All information contained in this application is true and correct to the best of my knowledge and belief. I understand that misrepresentations or omissions of any kind may result in denial of employment or be cause for subsequent dismissal if I am hired.
- 2. I authorize the Waukesha Water Utility to investigate my responses on this application and contact any or all of my former employers or any individuals familiar with my employment background for the purpose of verifying any information I have provided and/or for the purpose of obtaining any information about my employment. I voluntarily and knowingly fully release and hold harmless any person or organization that provides information pertaining to me or my employment.
- 3. I understand that upon receiving a job offer, a physical examination and drug screening may be required. (Note: If this is a job requirement, you will be notified.)
- 4. Regardless of whether or not I become employed by the Utility, I recognize this application is not and should not be considered a contract of employment. I understand that employment at the Utility is on an at-will basis and that my employment may be terminated with or without cause, and without notice, at any time, at my option or the Utility's, unless specifically provided otherwise in a written employment contract. I further understand that no company employee or representative has the authority to enter into a contract regarding duration or terms and conditions of employment other than an officer or official of the company, and then only by means of a signed, written document.

Signed	by_
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Date

Thank you for your interest in the WAUKESHA WATER UTILITY!