

Cabot Waterworks

Cabot Waterworks is an equal opportunity employer and affords equal opportunity to all applicants for all positions without regard to race, color, religion, gender, national origin, age, disability, veteran status or any other status protected under local, state or federal laws.

INSTRUCTIONS: Fill out this application **COMPLETELY** and accurately. All statements in your questionnaire are subject to verification. Incorrect statements may bar or remove you from employment. If space provided is inadequate, add additional pages and identify information by item number. If a question does not apply to you, indicate by writing n/a in the answer blank. Type or print legibly all responses in ink.

PERSONAL

Date: _____ Telephone: _____ Alt. Number: _____

1. Name: _____ / _____ / _____
First Middle Last Social Security Number

Other names used while employed, if any _____

2. Present Mailing Address: _____
Street and Number City State Zip Code

Previous Address: _____
Street and Number City State Zip Code

EMPLOYMENT DESIRED

3. Position(s) Sought: 1. _____
2. _____
3. _____

Regular Full Time _____ Part Time _____ Salary Expected: _____ Date Available: _____

4. Do you object to wearing a uniform? **Yes No**

5. Do you object to working nights/overtime? **Yes No**

6. Do you object to working shifts? **Yes No**

7. Have you ever been convicted of a crime, excluding misdemeanors and summary offenses, which have not been annulled or expunged or sealed by a court? **Yes No**

8. Are there any felony charges presently pending against you? **Yes No**
(Conviction or pending felony charges will not necessarily disqualify an applicant.)

If you answered yes to question 7 and/or 8, please explain: _____

9. Are you 18 years or older? **Yes No**

10. Are you legally eligible to work in the United States? **Yes No**
(If offered employment, you will be required to provide documentation to verify eligibility.)

11. Have you ever been discharged or forced to resign because of misconduct or unsatisfactory service?
Yes No

If yes, give details: _____

Cabot Waterworks
 P.O. Box 1287
 Cabot, AR 72023
 (501) 843-3566
 Fax: (501) 605-1740

WORK HISTORY

12. List **all** jobs you have held, putting your present or most recent job first. If you need more space, you may attach additional sheets. Include military service in proper time sequence and temporary/part-time jobs.

A. Title of present or last position _____ **Starting Salary** _____ **Last Salary** _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____
 Employer _____
 No. employees supervised by you: _____ Telephone Number: _____
 Address _____ City _____ State _____
 Duties _____

 Reason for leaving _____

B. Title of present or last position _____ **Starting Salary** _____ **Last Salary** _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____
 Employer _____
 No. employees supervised by you: _____ Telephone Number: _____
 Address _____ City _____ State _____
 Duties _____

 Reason for leaving _____

C. Title of present or last position _____ Starting Salary _____ Last Salary _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____

Employer _____

No. employees supervised by you: _____ Telephone Number: _____

Address _____ City _____ State _____

Duties _____

Reason for leaving _____

D. Title of present or last position _____ Starting Salary _____ Last Salary _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____

Employer _____

No. employees supervised by you: _____ Telephone Number: _____

Address _____ City _____ State _____

Duties _____

Reason for leaving _____

E. Title of present or last position _____ Starting Salary _____ Last Salary _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____

Employer _____

No. employees supervised by you: _____ Telephone Number: _____

Address _____ City _____ State _____

Duties _____

Reason for leaving _____

F. Title of present or last position _____ Starting Salary _____ Last Salary _____

Date Employed:		
Date Separated:		
Full-time	Yrs.	Mos.
Part-time	Yrs.	Mos.
If Part-time, # of hours worked per week:		

Name and title of supervisor _____

Employer _____

No. employees supervised by you: _____ Telephone Number: _____

Address _____ City _____ State _____

Duties _____

Reason for leaving _____

REFERENCES

14. May we contact your present employer? Yes No

15. Give the names of two responsible persons, other than relatives or past employers, who could provide information about your character, ability, experience, personality and other qualities:

NAME	ADDRESS, CITY, STATE	TELEPHONE

16. List anyone you personally know who is employed by the City of Cabot.

First/Last Name Position Department Relationship

17. Have you previously submitted an application for employment with the City? Yes No

Approximate date: _____

Position applied for: _____

MILITARY SERVICE

18. Were you ever in the U.S. Military Service or any other military organization? Yes No
 Branch of Service _____ Date of Enrollment _____ Highest Rank _____
 Date of Discharge _____ Did you receive an honorable discharge? Yes No

19. List medals/decorations and any special training received: _____

EDUCATION

20. List all schools attended:

Education/Type of School	Location (City and State)	Circle Last Yr Attended	Subjects Studied or Major	Year graduated	List Diploma/Degree/ Certificate Received
High School		9 10 11 12			
College or University		1 2 3 4			
College or University		1 2 3 4			
Business Trade, Other		1 2 3 4			

21. Did you either graduate from high school or pass the high school equivalency test? Yes No

22. List any specialized training, skills, equipment, and/or software that relates to the position for which you are applying. _____

DRIVING INFORMATION

23. Do you possess a valid driver's license? Yes No

License No.	State	Date Issued	Date Expires	Type (Pers., Comm., etc.)

24. Was your license, personal or commercial, ever suspended, denied or revoked? Yes No
If yes, state which and give reasons:

CAREER OBJECTIVES

26. List organizations, clubs, and associations of which you are or have been a member, or with which you are or have been associated.

27. Explain briefly your reasons for applying for this position:

28. State any additional information you feel may be helpful to us in considering your application.

I hereby certify that all information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that falsification, misrepresentation, or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

Signature: _____

Print Name: _____ **Date:** _____

**DISCLOSURE TO EMPLOYMENT APPLICANT
REGARDING PROCUREMENT OF
A CONSUMER REPORT**

In connection with your application for employment, we may procure a consumer report on you as part of the process of considering your candidacy as an employee. In the event that information from the report is utilized in whole or in part in making an adverse decision with regard to your potential employment, before making the adverse decision, we will provide you with a copy of the consumer report and a description in writing of your rights under the federal Fair Credit Reporting Act.

Please be advised that we may also obtain an investigative report including information as to your character, general reputation, personal characteristics, and mode of living. This information may be obtained by contacting your previous employers or references supplied by you. Please be advised that you have the right to request, in writing, within a reasonable time, that we make a complete and accurate disclosure of the nature and scope of the information requested. Such disclosure will be made to you with 5 days of the date on which we receive the request from you or within 5 days of the time the report was first requested.

The Fair Credit Reporting Act gives you specific rights in dealing with consumer reporting agencies. You will be given a summary of these rights together with this document.

This report will be processed by:

Cabot Waterworks
P.O. Box 1287
Cabot, AR 72023
501-605-1740

By your signature below, you hereby authorize us to obtain a consumer report and/or an investigative report about you in order to consider you for employment.

Applicant's Name: _____
(PLEASE PRINT)

Applicant's Address: _____

City/State/Zip: _____

Signature: _____

Social Security Number: _____

Date of Birth: _____

Drivers License Number: _____

Give original with Summary of Rights to applicant. Retain a copy for your files.

STATEWIDE CRIMINAL HISTORY CONSENT FORM

I hereby authorize Cabot Waterworks to receive any criminal history record information pertaining to me which may be in the files or any state or any local criminal justice agency.

Full Name (printed)

Street Address

City, State and zip code

Date of birth

Social Security number

Sex

Race

Authorizing Signature

Date signed

APPLICANT QUESTIONNAIRE

DIRECTIONS: Please write your response to each question. Do not write "see resume" or "see reference letter". You must answer all questions if you want to be considered for the current job opening. If you need more room, write on the back or attach another sheet (be sure to reference the item # you are responding to)

1. Can you operate the following?

a) Hand tools including shovels and wrenches	___ YES	___ NO	___ Years of experience
b) Jackhammer	___ YES	___ NO	___ Years of experience
c) Saws – list types used _____	___ YES	___ NO	___ Years of experience
d) Concrete Saw	___ YES	___ NO	___ Years of experience
e) Air compressor	___ YES	___ NO	___ Years of experience
f) Drills	___ YES	___ NO	___ Years of experience
g) Pipe cutter – list types used _____	___ YES	___ NO	___ Years of experience
h) Drive Dump Truck	___ YES	___ NO	___ Years of experience
i) Backhoe	___ YES	___ NO	___ Years of experience

2. Worked in environmental conditions such as rain, snow, cold and windy, etc? ___ YES ___ NO ___ Years of experience.

3. Have you performed the following manual activities?

a. Performed preventative maintenance checks	___ YES	___ NO	___ Years of experience
b. Obtained correct tools and fittings as instructed	___ YES	___ NO	___ Years of experience
c. Receive work instructions verbally, written or by phone	___ YES	___ NO	___ Years of experience
d. Dug ditches using a pick and a shovel	___ YES	___ NO	___ Years of experience
e. Assisted in laying pipe and connecting pipe	___ YES	___ NO	___ Years of experience
f. Replaced and repair mains and service lines	___ YES	___ NO	___ Years of experience
g. Turn on and turn off valves	___ YES	___ NO	___ Years of experience
h. Set Traffic signage	___ YES	___ NO	___ Years of experience
i. Acted as Flagger while workers on duty	___ YES	___ NO	___ Years of experience
j. Served as a spotter for backhoe or trackhoe operators	___ YES	___ NO	___ Years of experience
k. Work independently with indirect supervision	___ YES	___ NO	___ Years of experience
l. Account for time work correctly and truthfully	___ YES	___ NO	___ Years of experience
m. Perform pipe installation on grade	___ YES	___ NO	___ Years of experience

4. Can you lift 80 to 100 lbs. on a regular basis? ___ YES ___ NO ___ Years of experience

5. Do you have experience doing landscaping cleanup work? ___ YES ___ NO ___ Years of experience
Explain where you obtained this experience.

6. Have you worked in confined spaces before? ___ YES ___ NO ___ Years of experience. Explain where you obtained this experience.

7. Have you had OSHA safety training? ___ YES ___ NO ___ Years of experience If so, explain some of the safety topics you've had and where the training occurred.

8. What time do you arrive to work each day?

9. Do you complete all your assignments in a timely manner? ___ YES ___ NO If so, give some examples of timely assignments completed.

10. Have you had a job that required you to respond to call out on nights, weekends and holidays?
___ YES ___ NO ___ Years of experience If so, explain where you obtained this experience.

11. What is most important to you in a job?

12. What kind of work did you perform requiring the use of wrenches?

13. Are you a self-motivator? If so, give an example.

14. What gets you going in the morning?

15. Define your character.

16. Are you persistent or give up easy, explain

17. Prior Attendance issues

18. Define you work pace and give an example

19. Positive or negative influence to others, give an example.

20. Experience handling customers when upset and angry and makes threats, if so explain.

21. What are your goals in next 5 -10 years?

22. Give us 5 reasons you are the best candidate for the job?

23. Is it important to hussle to complete a job timely or take your time to be thorough? explain

___ YES ___ NO

I certify the answers provided are true and correct.

Signature

date

To Applicant: in order to check your prior work experience, please fill in your name in the areas provided.

EMPLOYER QUESTIONNAIRE

DIRECTIONS: Please respond to each question. I _____, have given permission to Cabot Waterworks to obtain my work experience from prior employer(s). I have also signed my name on each question below authorizing my prior employer(s) to answer.

Applicant signature date

1. Did _____ operate the following?
- | | | |
|--|----------------|-------------------------|
| a) Hand tools including shovels and wrenches | ___ YES ___ NO | ___ Years of experience |
| b) Jackhammer | ___ YES ___ NO | ___ Years of experience |
| c) Saws | ___ YES ___ NO | ___ Years of experience |
| d) Concrete Saw | ___ YES ___ NO | ___ Years of experience |
| e) Air compressor | ___ YES ___ NO | ___ Years of experience |
| f) Drills | ___ YES ___ NO | ___ Years of experience |
| g) Pipe cutter | ___ YES ___ NO | ___ Years of experience |
| h) Drive Dump Truck | ___ YES ___ NO | ___ Years of experience |
| i) Backhoe | ___ YES ___ NO | ___ Years of experience |

2. _____ worked in environmental conditions such as rain, snow, cold and windy, etc?
___ YES ___ NO ___ Years of experience.

3. Did _____ perform the following manual activities?
- | | |
|--|----------------|
| a. Performed preventative maintenance checks | ___ YES ___ NO |
| b. Obtained correct tools and fittings as instructed | ___ YES ___ NO |
| c. Receive work instructions verbally, written or by phone | ___ YES ___ NO |
| d. Dug ditches using a pick and a shovel | ___ YES ___ NO |
| e. Assisted in laying pipe and connecting pipe | ___ YES ___ NO |
| f. Replaced and repair mains and service lines | ___ YES ___ NO |
| g. Turn on and turn off valves | ___ YES ___ NO |
| h. Set Traffic signage | ___ YES ___ NO |
| i. Acted as Flagger while workers on duty | ___ YES ___ NO |
| j. Served as a spotter for backhoe or trackhoe operators | ___ YES ___ NO |
| k. Work independently with indirect supervision | ___ YES ___ NO |
| l. Account for time work correctly and truthfully | ___ YES ___ NO |
| m. Perform pipe installation on grade | ___ YES ___ NO |

4. _____ can lift 80 to 100 lbs. on a regular basis? ___ YES ___ NO ___ Years of experience

5. Does _____ have experience doing landscaping cleanup work?
___ YES ___ NO ___ Years of experience

6. Did _____ work in confined spaces before? ___ YES ___ NO

7. Did _____ have any OSHA safety training? ___ YES ___ NO

8. Did _____ complete assignments in a timely manner? ___ YES ___ NO

9. Has _____ ever been oncall on nights, weekends and holidays?

___ YES ___ NO

10. Did _____ have any prior Attendance issues? ___ YES ___ NO If yes, please explain.

11. What was _____ work pace? slow, medium or fast

12. What kind of attitude did _____ represent? positive or negative influence to others? If negative, please explain.

I give my permission to send the above questions and my answers to any of my prior employers.

Signature

date