



# NORTHSHORE UTILITY DISTRICT APPLICATION FOR EMPLOYMENT

Northshore Utility District is an equal employment opportunity employer

PO Box 82489  
Kenmore WA 98028-0489  
Voice: (425) 398-4400  
Fax: (425) 398-4433

Application  
Received on:

Position Applying  
For:

How did you learn  
about the opening?

**Instructions:**

(1) Carefully read the job announcement of the position for which you are applying. (2) Provide all information requested. (3) Print, sign, date, and return. An incomplete application may delay action or disqualify you.

Last Name:	First Name:	Middle Initial:	Email:
Street Address:		City:	State:      Zip:
<b>If you have lived at the above address for less than five years, please attach a listing of all addresses for the past five years.</b>			
Northshore Utility District is an Equal Employment Opportunity (EOE) employer and does not discriminate in any employment relations based on race, color, religion, sex, sexual orientation, national origin, age, marital status, disability, genetic information, veteran's status or any other basis protected by federal or state laws.			Home Phone:
			Mobile Phone:
1. Are you 18 years or older?			<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Are you a U.S. Citizen or can you provide documentation authorizing you to work in the USA?			<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Will you be able to perform the essential duties of the above position (reasonable accommodation will be provided, if necessary)?			<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Are you precluded from working for any employers in the U.S. on a full-time basis by Visa or immigration status? (*will be verified if hired)			<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Can you produce copies of diploma, certificate or transcripts from the institutions listed below to verify your academic records?			<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you have any activities, commitments, or responsibilities that may prevent you from meeting work attendance requirements?			<input type="checkbox"/> Yes <input type="checkbox"/> No
High School:		Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location (City & State):		If No, GED?	
College or University:		Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location (City & State):		Credit Hours:	Major:      Degree:
College or University:		Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Location (City & State):		Credit Hours:	Major:      Degree:
Other Training (describe):		Location:	
Training Institution:		Credit Hours:	Certificate Earned:
Other Training (describe):		Location:	
Training Institution:		Credit Hours:	Certificate Earned:
Other Training (describe):		Location:	
Training Institution:		Credit Hours:	Certificate Earned:

If a Commercial Driver's license or other license, certificate, or registration is required for this position, please complete the following:

Description of License Type or Class, Certificate, or Registration	License/Certificate	Issuing Agency	Expiration Date	Status
Commercial Driver License, indicate type (A, B, C); Any endorsements?				
Other (Indicate type):				
Other (Indicate type):				
Other (Indicate type):				

Do you know anyone currently employed by Northshore Utility District?	If so, who? (please name them all):
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Provide us with five professional references (do not include family members or relatives). We will be contacting them.

Name	Phone	Email	Position	Relationship

List other related job skills (computer, mechanical, other specialized or technical) that you want us to know about:

**Northshore Utility District**

**Applicant Name:**

Previous Employment Instructions: This section must be completed in detail. A resume will not substitute for a completed Northshore Utility District application form. Beginning with your present or most recent employment, list your work experience history. Limit your history to the last 10 years unless you feel that work experience is related to this position. Include any periods of self-employment, unemployment, U.S. military service, and any job-related volunteer experience. If additional space is necessary, attach a separate sheet.

Job Title:		Employer's Name and Address		
Supervisor's Name:				
Supervisor's Phone:	Employer's Phone:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of employee(s) supervised by you:	
Dates employed in month and year (from – to):		Hours per week:		
Duties:				
Reason for leaving:				

Job Title:		Employer's Name and Address		
Supervisor's Name:				
Supervisor's Phone:	Employer's Phone:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of employee(s) supervised by you:	
Dates employed in month and year (from – to):		Hours per week:		
Duties:				
Reason for leaving:				

Job Title:		Employer's Name and Address		
Supervisor's Name:				
Supervisor's Phone:	Employer's Phone:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of employee(s) supervised by you:	
Dates employed in month and year (from – to):		Hours per week:		
Duties:				
Reason for leaving:				

Job Title:		Employer's Name and Address		
Supervisor's Name:				
Supervisor's Phone:	Employer's Phone:	May we contact them? <input type="checkbox"/> Yes <input type="checkbox"/> No	No. of employee(s) supervised by you:	
Dates employed in month and year (from – to):		Hours per week:		
Duties:				
Reason for leaving:				

I certify that all statements on my application materials are true to the best of my knowledge. I understand and agree that false statements shall be sufficient cause for elimination from further consideration or, if employed, for disciplinary action up to and including termination. Unless otherwise indicated herein, I agree and give my full consent that any person, firm or organization listed hereon, or otherwise hired by Northshore Utility District for credit/background investigation, to furnish the District with reference material concerning my character, past employment, credit/criminal history or any other information requested. Further, I understand that at the time of hire I will be required to provide documentation which authorizes me to work in the United States of America. I understand all candidates considered for employment in a safety-sensitive position are required to submit to a pre-employment drug test. Failure to pass this drug test shall result in denial of employment.

Signature of Applicant: \_\_\_\_\_ Date Signed: \_\_\_\_\_