## **Possum Kingdom Water Supply Corporation**

1170 Willow Road Graford, Texas 76449 Possum Kingdom Lake (940)779-3100

## **Application for Employment**

The Possum Kingdom Water Supply Corporation (PKWSC) considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, disability, age, marital or veteran status, or any legally protected status.

(Please Print) Last Name First Middle Date Address Home Telephone City, State, Zip **Business Telephone** Position Applied For: (Applications are accepted for open positions only and will not be retained for future openings) Social Security No. Are you a citizen or otherwise authorized to work in the United States on an unrestricted basis? **Expected Salary** What days and hours are you available to work? **Expected Salary** On what date would you be available to begin work? State names of relatives who work for the PKWSC or serve on the Board of Directors. May we contact your present employer? Have you been convicted of a felony crime in the past ten years, including deferred adjudication? If "Yes", describe in full:

| Employment Experience  |  |
|--|--|
| Company Name and Address (Begin with current or most recent employer.)   | Employed (Month/Year) From to  Salary (per month) Start to |
| Name of Supervisor:  | Telephone ( )  |
| State Job Title and Duties:  | Reason for Leaving:  |
| Company Name and Address (Begin with current or most recent employer.)   | Employed (Month/Year) From to  Salary (per month) Start to |
| Name of Supervisor:  | Telephone ( )  |
| State Job Title and Duties:  | Reason for Leaving:  |
| Company Name and Address of the state of the | Englaved (Month/Your)                                      |
| Company Name and Address (Begin with current or most recent employer.)   | Employed (Month/Year) From to                              |
|  | Salary (per month) Start to                                |
| Name of Supervisor:  | Telephone ( )  |
| State Job Title and Duties:  | Reason for Leaving:  |
| If you need additional space, please continue on a se  | eparate sheet of paper.                                    |

| Have you ever been discharged by an employer |
|--|
| If "Yes", give date, company and reason.     |

| Education                                   |                                |   |                                |  |  |
|---|--------------------------------|---|--------------------------------|--|--|
| School                                      | Name & Location of School      | Course of Study   | Graduated?                     |  |  |
| Grade/Elementary                            |                                |   |                                |  |  |
| High School                                 |                                |   | Yes: Date / (month/year)       |  |  |
| College                                     |                                |   | Yes: Date/_<br>No:(month/year) |  |  |
| Other                                       |                                |   |                                |  |  |
|   | Specia                         | lized Skills  |                                |  |  |
| IBM/IBM Comp<br>Macintosh<br>Other Computer |                                | Welding Plumbing Instrumentation (Describe (Machine ( | Mechanic                       |  |  |
|   | Certifications/o               | ther Qualifications   |                                |  |  |
| associations.                               | lized training, apprenticeship |   | nembership in profession       |  |  |

## References: (List 3 personal references—omit relatives) Name \_\_\_\_\_ Telephone \_\_\_\_ Address Occupation City, State, Zip Length of time known Name \_\_\_\_\_ Telephone Address \_\_\_\_\_Occupation \_\_\_\_ City, State, Zip \_\_\_\_\_ Length of time known Name \_\_\_\_\_\_Telephone \_\_\_\_ Address Occupation City, State, Zip Length of time known **Applicant's Statement** I certify that the answers given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false information given in my application or interview(s) may result in discharge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand and acknowledge that any employment relationship with the PKWSC is at will, which means that the Employee may resign at any time and Employer may discharge the Employee at any time with or without cause. It is further understood that this at will employment relationship may not be changed by any written document or oral communication unless such change is specifically acknowledged in writing by the Board of Directors of the Possum Kingdom Water Supply Corporation. I understand that Possum Kingdom Water Supply Corporation requires pre-employment drug and alcohol screening. Signature of Applicant Date