



Central New York's Water Authority  
 PO Box 4949  
 Syracuse, NY 13221-4949

### Application for Employment

The Onondaga County Water Authority (OCWA) provides equal employment opportunities (EEO) to all employees and applicants for employment without regard to race, color, religion, creed, sex, sexual orientation, national origin, citizenship, ancestry, age, disability, arrest record, genetic predisposition, marital status, military or veteran status, familial status, domestic violence victim status, gender identity, or any other legally protected status.

**Personal Data**

Date \_\_\_\_\_

<b>Full Name</b>		<b>Social Security #: <u>Upon Request</u></b>		
_____		_____		
(Last)	(First)	(Middle)		
<b>Address</b>				
_____				
(Street)	(City)	(State)	(Zip Code)	(County)
_____				
(Home Phone)	(Cell Phone)	(Email)		
_____		_____		
Are you legally eligible for employment in the United States?	Yes	No		
Are you currently employed?	Yes	No		
Do you possess a valid New York State Driver's License:	Yes	No		
Do you currently hold a Commercial Driver's License?	Yes	No	Type: _____	
*Have you been convicted of a felony (excluding youthful offender adjudications) that was not dismissed, expunged, or sealed? If yes, please explain: _____				
_____				
*Criminal convictions do not automatically make you ineligible for employment.				

**Type of Employment Desired**

Position Applied For _____					
Full Time	Part Time	Date available for employment: _____			
Are you available to work:					
Nights	Yes	No	Overtime	Yes	No (including emergency call out)
Weekends	Yes	No	Rotating Schedule	Yes	No

## Education

Education	Name and Address of School	Field of Study/Major	Number of Years Attended	Graduate	
				Yes	No
High School or Equivalency	_____				
	(School Name)				
	_____				
	(Address)				
_____	(City) (State) (Zip Code)				
College or University	_____				
	(School Name)				
	_____				
	(Address)				
_____	(City) (State) (Zip code)				
Graduate School	_____				
	(School Name)				
	_____				
	(Address)				
_____	(City) (State) (Zip code)				
Business/Trade/ Technical	_____				
	(School Name)				
	_____				
	(Address)				
_____	(City) (State) (Zip code)				

## Employment History (Begin with most recent employment)

From	To	Employer Name	Telephone
Supervisor Name/Title		Employer Address:	
		City, State, Zip:	
Your Title		Description of work and responsibilities	
Hourly Rate/Salary		Reason for Leaving	

### Employment History

From	To	Employer Name	Telephone
Supervisor Name/Title		Employer Address: City, State, Zip:	
Your Title		Description of work and responsibilities	
Hourly Rate/Salary		Reason for Leaving	

### Employment History

From	To	Employer Name	Telephone
Supervisor Name/Title		Employer Address: City, State, Zip:	
Your Title		Description of work and responsibilities	
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### Employment History

From	To	Employer Name	Telephone
Supervisor Name/Title		Employer Address: City, State, Zip:	
Your Title		Description of work and responsibilities	
Hourly Rate/Salary		Reason for Leaving	

## Skills and Professional Experience

Do you have any special skills, experience and/or training that would enhance your ability to perform the position applied for? If yes, explain.

If you desire, list professional, business, civic, or volunteer activities including offices held.

## Referral Source

How did you hear about the Water Authority?

## Acknowledgement

I certify that the information provided in this Application for Employment and related papers is true, accurate and complete. I understand that any falsification or willful omission can be grounds for dismissal or refusal to hire.

I hereby authorize any person, educational institution, or company I have listed on my employment application or on related papers, to disclose in good faith any information they may have regarding my qualifications, fitness for employment and any other reasonable and necessary information incident to the employment process. I release the Onondaga County Water Authority, any former employers, educational institutions and any other persons giving references, from all liability for damage that may result from use of such information.

I am aware that (1) the Onondaga County Water Authority has a drug and alcohol policy that provides for pre-employment testing as well as testing after employment, (2) consent to and compliance with such policy is a condition of my employment; and (3) continued employment is based on the successful passing of testing under such policy. I further understand that continued employment may be based on the successful passing of job-related physical examinations.

I acknowledge that this application does not create an expressed or implied employment contract.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please Print Name \_\_\_\_\_