



# Granger-Hunter Improvement District

2888 South 3600 West P.O. BOX 701110 WEST VALLEY CITY, UTAH 84170  
 TELEPHONE: (801) 968-3551 FAX: (801) 968-5467 Website: www.ghid.org

## Employment Application

**INSTRUCTIONS: Please print or type.** The application must be filled out accurately and completely. Answer all questions. Applications containing unrequested information will not be considered. Do not leave an item blank. If an item does not apply, write N/A (not applicable). If you need additional space to answer a question fully, you may attach full sheets of paper that are the same size as this page. On each additional page, be sure to include your name and the position title. You may also attach copies of documents or certificates which support your application. All statements made on the application are subject to verification. Incomplete applications or applications with omissions or exaggerated, false or misleading statements may result in rejection of the application or dismissal from employment.

Position Applied For			Date of Application
How did you learn about us?			
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Employment Agency	
<input type="checkbox"/> Workforce Services	<input type="checkbox"/> Relative	<input type="checkbox"/> Other _____	

Last Name	First Name	Middle Name	
Address	City	State	Zip Code
Telephone Number(s) Home:	Work:	Other:	

### ADDITIONAL INFORMATION

Can you provide documentation of your age if it is less than 18?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever filed an application with us before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No If yes, give date _____
Have you ever been employed with us before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No If yes, give date _____
Are you currently employed? May we contact your present employer?	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
Can you provide documentation of your eligibility to work in this country? <i>Proof of citizenship or immigration status will be required upon employment.</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you available to work:	<input type="checkbox"/> Full Time	<input type="checkbox"/> Part Time <input type="checkbox"/> Shift Work
Do you have any commitments or agreements with another employer that might affect your employment with the Granger-Hunter Improvement District? If Yes, please explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Can you travel if a job requires it?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you been convicted of a felony within the last 7 years? <i>Conviction will not necessarily disqualify an applicant from employment.</i> If Yes, please explain _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**EMPLOYMENT EXPERIENCE** - List your most recent job first. If you need additional space, please continue on a separate sheet of paper. **Please complete this section even if resume is attached.**

1. Employer		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<u>Dates Employed</u>		Work Performed
				From	To	
Address						
Telephone Number(s)				<u>Hourly Rate/ Salary</u>		
				From	To	
Job Title		Supervisor				
Reason for Leaving						
May we contact this employer?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	If No, please explain:
2. Employer		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<u>Dates Employed</u>		Work Performed
				From	To	
Address						
Telephone Number(s)				<u>Hourly Rate/ Salary</u>		
				From	To	
Job Title		Supervisor				
Reason for Leaving						
May we contact this employer?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	If No, please explain:
3. Employer		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<u>Dates Employed</u>		Work Performed
				From	To	
Address						
Telephone Number(s)				<u>Hourly Rate/ Salary</u>		
				From	To	
Job Title		Supervisor				
Reason for Leaving						
May we contact this employer?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	If No, please explain:
4. Employer		<input type="checkbox"/> Full-Time	<input type="checkbox"/> Part-Time	<u>Dates Employed</u>		Work Performed
				From	To	
Address						
Telephone Number(s)				<u>Hourly Rate/ Salary</u>		
				From	To	
Job Title		Supervisor				
Reason for Leaving						
May we contact this employer?				<input type="checkbox"/> Yes	<input type="checkbox"/> No	If No, please explain:

Have you ever been dismissed or asked to resign from any position?  Yes  No

Do you or can you hold a current Drivers License?  Yes  No  
 Do you hold a current Commercial Drivers License?  Yes  No  
 If no, could you obtain one for a required position?  Yes  No

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**Education**

High School and College / University	Educational Field	Degree	Hours Left To Earn Degree	No. of Years Attended	Overall GPA (A = 4.0)
High School					
City & State					
College	Major				
City & State	Minor				
College	Major				
City & State	Minor				

If the position you are applying for requires a degree, please attach a copy of your transcripts.

**Computer Skills**

*Please circle skill level for those that apply (1 = Low , 5 = High):*

IBM or compatible	<input type="checkbox"/> Yes <input type="checkbox"/> No	Paradox	1 2 3 4 5
Macintosh	<input type="checkbox"/> Yes <input type="checkbox"/> No	Access	1 2 3 4 5
Windows	1 2 3 4 5	Auto CAD	1 2 3 4 5
WordPerfect	1 2 3 4 5	Please list other computer skills and proficiency.	
Word	1 2 3 4 5		1 2 3 4 5
Quattro Pro	1 2 3 4 5		
Excel	1 2 3 4 5		
Lotus 1-2-3	1 2 3 4 5		

**Specialized Skills**

<i>Check skills/equipment operated</i>	<i>List any heavy equipment operated</i>	<i>List any other skills or equipment operated</i>
<input type="checkbox"/> Fax		
<input type="checkbox"/> Copier		
<input type="checkbox"/> Multi-line telephone system		
<input type="checkbox"/> Surveying		

**References**

<i>List persons, except supervisors, who can provide information about your work.</i>				Years Known
Name	His/Her Position	Relationship to You	Area Code -Phone Number	
Organization		City	State	
Name	His/Her Position	Relationship to You	Area Code -Phone Number	
Organization		City	State	
Name	His/Her Position	Relationship to You	Area Code -Phone Number	
Organization		City	State	

**Applicant's Statement - Please read the following carefully**

I certify that the information given herein is true and complete to the best of my knowledge. I authorize Granger-Hunter Improvement District (the District) to contact my former employers, schools, etc., to obtain information regarding me. I hereby release the District from any liability and hold it harmless from any claim for releasing any truthful information within their knowledge and/or records.

I authorize the District to release to any person, firm, entity or organization with whom I may seek employment in the future, any truthful information concerning my work experience with the District, and I hereby release and hold the District harmless from any claim for releasing such information.

I understand that employment with the District is contingent upon satisfactory completion of a pre-employment medical examination and chemical screening. I understand that the District is a drug free workplace. If offered a position, I give my voluntary consent to a pre-employment medical examination drug test "through the District's provider at the expense of the District". I understand that any job offer that may be extended to me will be contingent upon successful completion of the pre-employment medical examination and drug test.

I authorize the District to review my current driving record knowing that any position offered is contingent on this review.

I understand that current District policy precludes the hiring of a "relative" of a current District director, officer, or employee. "Relative" is defined as: mother, father, husband, wife, son, daughter, sister, brother, mother-in-law, father-in-law, sister-in-law, brother-in-law, son-in-law, daughter-in-law, step-child, step-father, step-mother, niece, nephew, or first cousin.

During the course of my employment, I authorize the District to conduct investigations concerning perceived violations of any District policies, including but not limited to harassment and workplace violence.

I understand that falsification or omission in any detail may result in disqualification from further consideration of, or dismissal from, employment at the time or after the District discovers the omission or falsification.

I understand that this application is current only for 30 days and, thereafter, I must complete and submit a new application to be considered for employment.

I have had the opportunity to have my questions about this statement's content and intent answered, and I understand its terms.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

***Granger-Hunter Improvement District is an Equal Opportunity Employer***

***The District will not discriminate against any employee or applicant for employment because of race, color, religion, sex, national origin, disability, age, or veteran status, and will ensure that applicants are employed, and employees are treated during employment, without regard to these characteristics.***