

WE ARE AN EQUAL  
OPPORTUNITY EMPLOYER



8570 Executive Park Ave., Fairfax, VA 22031

## APPLICATION FOR EMPLOYMENT

[Please Print]

Last Name	First Name	Middle Name
Address	City	State/Zip Code
Telephone Number(s)	E-mail address	

### EMPLOYMENT DESIRED:

Position Applied For	Job Code	Today's Date
How Did You Learn About Us?		
<input type="checkbox"/> Advertisement (print)	<input type="checkbox"/> Current Employee	<input type="checkbox"/> Walk-In
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other: _____
		<input type="checkbox"/> Web site: _____

- 1) If you are under 16 years of age, before employment, can you provide the required proof of your eligibility to work?  Yes  No
- 2) Have you ever filed an application with us before?  Yes  No  
If yes, give date: \_\_\_\_\_
- 3) Have you ever been employed with us before?  Yes  No  
If yes, give date: \_\_\_\_\_
- 4) Are you available to work: (check all that apply)  Full Time  Part Time  Temporary  Student/Summer
- 5) If an offer of employment was extended to you, on what date could you start? \_\_\_\_\_
- 6) Can you and are you willing to travel if your job requires it?  Yes  No
- 7) If you answered "Yes" to question #6 when can you travel?  
 During the day only  Occasionally overnight  Frequently overnight
- 8) If employment is offered, do you intend to have any type of secondary employment or self-employment?  Yes  No
- 9) Are you legally eligible to work in the United States?  
(Proof of your legal right to work in the United States will be required upon employment.)  Yes  No

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10) If required, would you be willing to work (Please check one box in each category):

- Overtime  Yes  No
- Holidays  Yes  No
- Saturday  Yes  No
- Sunday  Yes  No
- Rotating Shifts  Yes  No

11) Indicate the days or nights you are NOT available to work, if any: \_\_\_\_\_

12) Have you ever been terminated from employment or asked to resign by an employer?  Yes  No

If yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13) Do you have any relatives employed by this organization?  Yes  No

If yes, who and at what location? \_\_\_\_\_

14) Please list any other names that you have used in employment or in your education:

Specify name & years of use: \_\_\_\_\_

**CRIMINAL RECORD:**

Have you ever been convicted of, or pled guilty to, any felony or misdemeanor (do not list any dismissed or expunged charges)?

- Yes  No

**If yes, please explain:**

Date	Case # (If known)	Location: City/State	Charge	Court	Action Taken

**ILLEGAL USE OF DRUGS:**

Fairfax Water has a drug-free workplace policy. Are you willing to be tested for the use of illegal drugs?  Yes  No

**DRIVING RECORD:**

1) Do you have a valid current license to drive a vehicle?  Yes  No

Driver's License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Issuing State: \_\_\_\_\_ Class of License: \_\_\_\_\_

2) Has your license been revoked or suspended during the past seven years?  Yes  No

If your answer to question 2 is yes, please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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**EMPLOYMENT HISTORY:**

- 1) Are you currently employed?  Yes  No
- 2) May we contact your present employer?  Yes  No  
     If no, may we contact your present employer once an offer has been made?  Yes  No
- 3) Are you currently on "lay-off" status and subject to recall?  Yes  No
- 4) May we contact your former employer(s)?  Yes  No
- 5) Are you willing to provide previous employer performance evaluations?  Yes  No
- 6) Will you accept an offer within the advertised hiring range?  Yes  No  
     If no, what range will you accept? \_\_\_\_\_

List all current and previous employment. List most recent position first. If numerous employers, list a minimum of seven years history (attaching sheets if necessary). All information for each position must be provided and any gaps in your employment history must be explained. Although some of the information requested might be on your resume, please complete all of the employment history requested. Incomplete information may impact your application process. You may attach your resume as a supplement to this application.

1. Company: _____ Co. Phone Number: _____ Co. Address: _____ _____ City/State _____ ZIP _____ Type of Business: _____ Title/Position: _____ Dates of Employment: _____ (From Month/Yr –To Month/Yr) Base Salary: _____ Start _____ End _____	Other Compensation: _____ Immediate Supervisor (Name & Title): _____ Reason for Leaving: _____ Duties, responsibilities, and accomplishments: _____ <b>Average number of hours per week?</b> _____
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2. Company: _____ Co. Phone Number: _____ Co. Address: _____ _____ City/State _____ ZIP _____ Type of Business: _____ Title/Position: _____ Dates of Employment: _____ (From Month/Yr –To Month/Yr) Base Salary: _____ Start _____ End _____	Other Compensation: _____ Immediate Supervisor (Name & Title): _____ Reason for Leaving: _____ Duties, responsibilities, and accomplishments: _____ <b>Average number of hours per week?</b> _____
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3. Company: \_\_\_\_\_  
Co. Phone Number: \_\_\_\_\_  
Co. Address: \_\_\_\_\_  
\_\_\_\_\_  
City/State ZIP

Type of Business: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

(From Month/Yr –To Month/Yr)

Base  
Salary: \_\_\_\_\_ Start \_\_\_\_\_ End \_\_\_\_\_

Other Compensation: \_\_\_\_\_  
Immediate Supervisor (Name & Title): \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Duties, responsibilities, and accomplishments:

**Average number of hours per week?** \_\_\_\_\_

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4. Company \_\_\_\_\_  
Co. Phone Number: \_\_\_\_\_  
Co. Address: \_\_\_\_\_  
\_\_\_\_\_  
City/State ZIP

Type of Business: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

(From Month/Yr –To Month/Yr)

Base  
Salary: \_\_\_\_\_ Start \_\_\_\_\_ End \_\_\_\_\_

Other Compensation: \_\_\_\_\_  
Immediate Supervisor (Name & Title): \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Duties, responsibilities, and accomplishments:

**Average number of hours per week?** \_\_\_\_\_

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5. Company \_\_\_\_\_  
Co. Phone Number: \_\_\_\_\_  
Co. Address: \_\_\_\_\_  
\_\_\_\_\_  
City/State ZIP

Type of Business: \_\_\_\_\_

Title/Position: \_\_\_\_\_

Dates of Employment: \_\_\_\_\_

(From Month/Yr –To Month/Yr)

Base  
Salary: \_\_\_\_\_ Start \_\_\_\_\_ End \_\_\_\_\_

Other Compensation: \_\_\_\_\_  
Immediate Supervisor (Name & Title): \_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
Duties, responsibilities, and accomplishments:

**Average number of hours per week?** \_\_\_\_\_

**EDUCATION AND TRAINING:**

Indicate highest level of education completed:

High School Did you graduate from H.S.? <input type="radio"/> Yes <input type="radio"/> No GED? <input type="radio"/> Yes <input type="radio"/> No	Technical School <input type="radio"/> 1 <input type="radio"/> 2	College/University <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4	Graduate School <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3
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Name of School/College	Location: City/State	Course Study	Years Completed	Did you Graduate?	Degree

1) List Additional Education, Vocation, and/or Trade Information:

2) List all Professional Licenses or Certifications:

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3) Computer Skills (Please list software):

Other machines, trades, special skills or qualifications:

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4) Other Qualifications (Summarize special job-related skills and qualifications acquired from employment or other experience):

5) State any additional information you feel may be helpful to us in considering your application:

6) Educational gaps or additional facts for consideration:

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**U. S. Military Service:**  Yes  No Branch: \_\_\_\_\_ Rank: \_\_\_\_\_ Date of Discharge: \_\_\_\_\_

Describe any job-related training received in the United States Military:

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**Please read carefully before signing.**

I understand that neither the completion of this application nor any part of the hiring process establishes any obligation by Fairfax Water to hire me. If I am hired, I understand that either Fairfax Water or I can terminate my employment at any time and for any reason. **I Understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Fairfax Water is an at-will nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. I further understand that this at-will employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledge in writing by an authorized executive of Fairfax Water.**

All of the information I have given to Fairfax Water in considering me for employment is true and correct. I understand that Fairfax Water may decide to conduct substance abuse screenings, consumer credit file reviews, motor vehicle record reviews and criminal background checks that formally may be considered an “investigative consumer report.” I authorize, to the fullest extent permitted by law, any such substance abuse screenings, motor vehicle record reviews and/or background check or investigation directly or through Fairfax Water’s agents, and further authorize my former employers, references, physicians and acquaintances to give any such information they may have regarding me. I expressly agree that information from each of these sources may be used by Fairfax Water in considering this application. In this regard, I expressly agree to sign whatever forms Fairfax Water reasonably requires, including appropriate authorization forms, so that Fairfax Water may contact these sources and obtain relevant information about me.

I expressly acknowledge and agree that employment with Fairfax Water, if offered, may be contingent upon – if required, in the organization’s sole discretion and to the extent permitted by law – my completion, with favorable results, of a pre-employment physical, a review of my background and/or substance abuse screening test. In addition to the authorizations granted above, I hereby state, certify and represent that I have read the Fair Credit Reporting Act disclosure statement provided to me and that I understand such disclosure statement. I hereby authorize Fairfax Water and its subsidiaries and related entities to obtain and review the “investigative consumer report” referenced in such disclosure statement.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**EMPLOYMENT CONSUMER REPORT AUTHORIZATION**

I hereby affirm that my answers on my Application for Employment are true and correct and that I have not knowingly withheld any fact or circumstance that would, if disclosed, affect my application unfavorably.

I acknowledge receipt of the Employment Consumer Report Disclosure and the summary of consumer rights entitled, *A Summary of Your Rights under the Fair Credit Reporting Act*. (Pages 8-9, attached).

I authorize Fairfax Water to secure an investigative consumer report for employment purposes.

In connection with my application for employment, and for the duration of my employment, I authorize Fairfax Water's consumer reporting agency to verify any and all information contained in this application.

Any misrepresentation made in this application will be sufficient cause for cancellation of the application and/or for separation from Fairfax Water if the organization employs me.

I understand that I have the right, under Section 606(B) of the federal Fair Credit Reporting Act, to make a written request, within a reasonable time, for a complete and accurate disclosure of the nature and scope of the investigative consumer report.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Attention Applicant – please keep pages 8 and 9 of this application for your reference.**

## EMPLOYMENT CONSUMER REPORT DISCLOSURE

This disclosure is to advise you that, in the normal course of processing your employment application, Fairfax Water may obtain an investigative consumer report for employment purposes. This report will be provided by HR Plus (HRP) or other third party vendors as Fairfax Water determines necessary, a consumer reporting agency which may play a part in our decision or may make recommendations to us regarding our decision.

The report provided to us by HRP, Inc. may include a consumer report for employment purposes from Credit Information Services, which is not involved in our decision-making and which is unable to explain or provide information regarding our decision. The investigative consumer report provided by Fairfax Water may include, but is not necessarily limited to, the following:

- Consumer credit report for employment purposes (Personal)
- Criminal history records investigation
- MVA driving record
- Verification of education
- Verification of employment history

If you have any questions regarding reports provided by HRP, Inc., you may contact them directly:

HR Plus  
2902 Evergreen Pkwy.  
Evergreen, CO 80439  
800-332-7587

## Fairfax Water – Application for Employment

### A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

• **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

• **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if: • a person has taken adverse action against you because of information in your credit report; • you are the victim of identify theft and place a fraud alert in your file; • your file contains inaccurate information as a result of fraud; • you are on public assistance; • you are unemployed but expect to apply for employment within 60 days. In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

• **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

• **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.

• **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

• **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

**You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit)

• **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688). • **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit)

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	FTC Consumer Response Center - FCRA Washington, DC 20580 (877-382-4357)
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Wash, DC 20219 (800-613-6743)
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Wash DC 20551 (202-452-3693)
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 (800-842-6929)
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Admin. 1775 Duke St. Alexandria, VA 22314 (703-519-4600)
State-Chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corp. Consumer Response Center, 2345 Grand Ave., Suite 100, Kansas City, MO 64108 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Dept. of Transportation, Office of Financial Management, Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Dept. of Agriculture, Office of Deputy Administrator – GIPSA, Washington, DC 20250

