

HUMBOLDT WASTE MANAGEMENT AUTHORITY
1059 W. HAWTHORNE STREET
EUREKA, CA 95501
(707) 268-8680
www.hwma.net



EMPLOYMENT APPLICATION FOR: _____

THIS APPLICATION IS NOT AN EMPLOYMENT CONTRACT but is merely intended to evaluate suitability for employment. It is our policy to provide equal opportunity for employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, disability, veteran status, or any other status protected under State or Federal law. For certain jobs with special needs, the Authority has a policy of requiring a physician's physical fitness exam, together with urine drug testing of persons who have been offered employment. Individuals who are determined by the physician not to be physically fit for duty, or who test positive for controlled substances, will not be employed. If you have reason to believe that you will not pass a physician's physical examination, or will test positive for the presence of controlled substances, or if you are unwilling to consent to such an examination or test if offered employment for a job requiring the examination and testing, it is recommended that you not submit an application.

PERSONAL INFORMATION

1. Name (Last, First Middle)		2. Driver's License (State & Number)	
3. Address (street address)		4. Home Telephone Number	5. Alternate Phone Number
(City, State, Zip)		6. E-mail address	
7. Are you capable of satisfactorily performing the essential job duties required of the position for which you are applying? <i>If no, list any functions you cannot perform under Item 17.</i>	Yes	No	12. How many days of work have you missed in the last three years due to reasons other than paid holidays and vacation? 2023 _____ 2024 _____ 2025 _____
	8. If hired, can you furnish proof that you are over 18 years of age?	Yes	
9. Have you previously worked for Humboldt Waste Management Authority? <i>If yes, in Item 17 list department, position and dates of employment.</i>	Yes	No	13A. Do you have adequate transportation to/from work? 13B. Do you have a valid Driver's License?
10. Do you have any gaps in your employment history? <i>If yes, explain in Item 17 below.</i>	Yes	No	
11. Have you ever been discharged or forced to resign from any job? <i>If yes, explain in Item 17 below.</i>	Yes	No	

14. **Are you prevented from lawfully becoming employed in this country because of visa or immigration status?** Yes No
 (proof of citizenship or immigration status will be required upon employment)

NOTE: Do not include minor traffic infractions, and convictions for which the record has been sealed or expunged, any conviction for which probation has been successfully completed or otherwise discharged and the case has been judicially dismissed, referrals to and participation in any pretrial or post trial diversion programs, and marijuana-related offenses that occurred over two years ago in answering these questions.

15. Use this space to explain any of the above questions. Attach additional 8 1/2" by 11" sheets if needed.

EDUCATION

School Level	Names and Location of School Attended	Graduated		Major Subject/Degree Received
		Yes	No	
High School				
College				
Other				

REFERENCES

Provide the names of three persons, not related to you, whom you have known at least one year.

Name	Address	Telephone #	Years Acquainted

PLEASE CHECK whether there is any issue(s)/incident(s) which occurred during your current or former employment that you think may impact HWMA's decision to hire you.

Yes. There is an issue(s)/incident(s) that may impact HWMA's hiring decision.

No. There is no issue(s)/incident(s) that may impact HWMA's hiring decision.

PLEASE TAKE NOTICE that if you do not disclose an issue/incident, and HWMA later discovers you did not disclose such issue, the HWMA MAY REJECT YOUR APPLICATION if the employer believes that the issue/incident should have been disclosed.

Please explain any issue below:

APPLICANT'S STATEMENT:

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I UNDERSTAND THAT HWMA MAY REJECT MY APPLICATION IF IT DISCOVERS AN ISSUE(S)/INCIDENT(S) WHICH OCCURRED DURING MY CURRENT OR FORMER EMPLOYMENT, AND I DID NOT DISCLOSE SUCH ON THIS JOB APPLICATION. I ALSO UNDERSTAND THAT ANY FALSE, INCOMPLETE, OR INCORRECT STATEMENTS MAY RESULT IN MY DISQUALIFICATION FROM THE APPLICATION PROCESS OR DISMISSAL FROM EMPLOYMENT WITH HWMA.

I UNDERSTAND AND ACKNOWLEDGE THAT, IF HIRED, MY EMPLOYMENT RELATIONSHIP WITH HWMA WOULD BE OF AN "AT-WILL" NATURE, WHICH MEANS THAT THE EMPLOYEE MAY RESIGN AT ANY TIME AND HWMA 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 CONDUCT UNLESS AN AUTHORIZED EXECUTIVE OF HWMA SPECIFICALLY ACKNOWLEDGES SUCH CHANGE IN WRITING.

Applications may be submitted in person to HWM'As main office or send via email to aheacock@hwma.net

Signature of Applicant (required):

Date: