



**Overton Power District #5  
EMPLOYMENT  
APPLICATION**

AN EQUAL OPPORTUNITY EMPLOYER  
**Overton Power District #5 Human  
 Resources**  
 615 N. Moapa Valley Blvd.  
 PO Box 395  
 Overton, NV 89040  
 (702) 397-2512

Date: \_\_\_\_\_ Position Applying For: \_\_\_\_\_

Department: \_\_\_\_\_ Town: \_\_\_\_\_

Pay Expected \_\_\_\_\_ Date Available for work \_\_\_/\_\_\_/\_\_\_

How did you learn about this job opportunity?

In-House \_\_\_\_\_ Newspaper: \_\_\_ Friend \_\_\_ Internet \_\_\_ Other \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_

Have you ever been bonded Yes No If yes, give employer(s) \_\_\_\_\_

Are you a current District employee? Yes \_\_\_ No \_\_\_ If Yes, What Department? \_\_\_\_\_

May we contact you at work? Yes No Work Number: (\_\_\_\_) \_\_\_\_\_

**EDUCATION RECORD**

SCHOOL NAME	LOCATION	HOURS EARNED	DIPLOMA, DEGREE CERTIFICATE	MAJOR FIELD OF STUDY
High School				
Business/Technical Vocational				
College/University (Undergraduate)				
Graduate School				

For positions which require high school graduation, a GED, or a college degree, a copy of the high school diploma/GED certificate or college diploma may be required.

APPLICANT NAME: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

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**LICENSES**

List Driver's License and other current licenses, certifications, or registrations required for the position for which you are applying. Indicate types, state license numbers and expiration dates.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**SKILLS**

List any special skills you possess which may pertain to this position, and/or equipment or office machines you can operate.

\_\_\_\_\_  
\_\_\_\_\_

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**LANGUAGE**

(Other than English), in which language can you clearly communicate?

\_\_\_\_\_  
\_\_\_\_\_

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**OTHER INFORMATION**

If you are not a current District Employee, have you previously worked for the District?

( ) YES ( ) NO When and What Department? \_\_\_\_\_

Is a relative of yours currently employed by the District? ( ) YES ( ) NO Name: \_\_\_\_\_

During the last ten years, have you been convicted of, pled guilty or nolo contrende to, or been granted deferred adjudication for a felony or any lesser crime which may be directly related to your qualification for this job? (Example: Conviction for reckless driving may not be related to your qualifications for a clerical position in the Public Works department, but could be related to your qualifications for a road maintenance worker.) ( ) Yes ( ) No

If Yes, list all such offenses and give date, name of court and disposition. You may omit minor violations for which you paid a fine of \$50 or less. \_\_\_\_\_

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**ACKNOWLEDGEMENTS**

Please read ALL of the following statements and **INITIAL** each line to indicate you have read and understood each of the statements. If you have any questions, contact Overton Power District #5 Human Resources (702)397-2512.

- \_\_\_\_\_ Following an offer of employment, you will be required to submit verification of your legal right to work in the United States.
  - \_\_\_\_\_ All offers of employment and all information regarding compensation and other terms and conditions will be made in writing. Verbal statements may not be relied upon.
  - \_\_\_\_\_ Employment will be 'at will' unless specifically stated to be otherwise. 'At Will' means the District has no obligation to continue my employment in the future.
  - \_\_\_\_\_ This application is the property of the District and will become part of my personnel file, if I am hired.
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APPLICANT NAME: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

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**REFERENCES:** List three school or personal references not related to you.

Name	Telephone:	Years Known
1) _____	(____) _____	_____
2) _____	(____) _____	_____
3) _____	(____) _____	_____

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**EMPLOYMENT HISTORY**

Provide information regarding all paid, military, and volunteer work. Describe your most recent position first; then list other positions in order, working down from the most recent. Use a separate block for each position-even though with the same organization. Explain any gaps in employment. Use additional sheets if necessary. **DO NOT use references such as 'See Resume' in place of completing this section.**

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Present Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
City, State and Zip: \_\_\_\_\_ Full Time (30+) \_\_\_\_\_ or Part Time (-30) \_\_\_\_\_  
Position: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_  
Related Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
May we contact this employer for reference? Yes No Later \_\_\_\_\_

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City, State and Zip: \_\_\_\_\_ Full Time (30+) \_\_\_\_\_ or Part Time (-30) \_\_\_\_\_  
Position: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_  
Supervisor's Name and Title: \_\_\_\_\_  
Related Duties: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Reason for Leaving: \_\_\_\_\_  
May we contact this employer for reference? Yes No Later \_\_\_\_\_

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APPLICANT NAME: \_\_\_\_\_ POSITION APPLIED FOR: \_\_\_\_\_

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Previous Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

City, State and Zip: \_\_\_\_\_ Full Time (30+) \_\_\_\_\_ or Part Time (-30) \_\_\_\_\_

Position: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Related Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for reference? Yes No Later \_\_\_\_\_

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Position: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Related Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for reference? Yes No Later \_\_\_\_\_

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Supervisor's Name and Title: \_\_\_\_\_

Related Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

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Position: \_\_\_\_\_ Starting Salary \_\_\_\_\_ Ending \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_

Related Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer for reference? Yes No Later \_\_\_\_\_

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I understand that an investigation may be made in which information is gathered regarding my character, previous employment, education background, criminal history, and other qualifications for employment with Overton Power District #5. I authorize anyone possessing this information to furnish it to the District upon request, and I release Overton Power District #5 from all liability and damages whatsoever in furnishing, obtaining or using this information.

I certify that all statements are true to the best of my knowledge and I agree and understand that any misstatements or omissions of material facts on my part may forfeit my participation in the selection process and/or my right to employment, even if discovered after I have become an employee of Overton Power District #5.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

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Questions? Call Overton Power District #5 Human Resources at (702) 397-2512 x1017  
Interview accommodations for disabled applicants can be arranged by calling the  
Human Resources Department at 702-397-2512 x1017.

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**OVERTON POWER DISTRICT # 5 HUMAN RESOURCES/RISK MANAGEMENT  
SUBSTANCE ABUSE POLICY RELEASE FORM**

I have been informed that, as a condition of any offer of “at-will” employment or as a condition of my continued “at-will” employment, I must submit to a urine, hair and/or blood drug screening test and I accept this condition. I agree that any drug testing facility is authorized by me to provide the results of this test(s) to **OVERTON POWER DISTRICT #5 RESOURCES/RISK MANAGEMENT**. I agree to indemnify and hold the District harmless from and against any and all liabilities or judgments arising out any claim related to (i) the employer’s submission and handling of the test(s) samples, (ii) compliance by employer with federal and state law, or (iii) the employer’s interpretation, use (including employment decision) and confidentiality to the test results; except where the testing facility is found to have acted negligently with respect to such matters.

I understand that if I fail to cooperate with a testing procedure, or in the case of a positive test result, I may not be employed by **OVERTON POWER DISTRICT #5 HUMAN RESOURCES/RISK MANAGEMENT** or my employment may be terminated by **OVERTON POWER DISTRICT #5 HUMAN RESOURCES/RISK MANAGEMENT**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT/EMPLOYEE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESS



## Disclosure Authorization & Release Form

I, \_\_\_\_\_ (print name), authorize Overton Power District #5 to contact any employer or individual that I have listed on my employment application and/or resume or mentioned in job interviews, and to obtain from them any relevant information regarding my previous employment, education, certificates, licenses, military service, criminal history, characteristics or traits, or other qualifications for employment with Overton Power District #5.

In exchange for Overton Power District #5's consideration of my employment application, I authorize anyone possessing this information to furnish it to the District upon request, and I release the individual company or institution and all individuals providing the information or acquiring the information, including the District, from all claims, liability, and damages whatsoever in furnishing, obtaining, or using said information including, but not limited to, claims for defamation, libel, slander, infliction of emotional distress, and interference with current or prospective economic relations.

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Name (print)

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Name (signed)

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Date