

Tualatin Valley Water District



1850 SW 170th Ave, Beaverton OR 97006

Phone: 503-848-3081, Fax 503-356-3181

Email address: kathryn@tvwd.org

Intern Application

Full Name: _____

Date: _____

Current Address/Telephone #:

Permanent Address/Telephone #:

Email: _____

Availability Dates: From: _____ To: _____

Education:

Grade Level Completed: _____

School, Major and Department: _____

Anticipated Graduation: _____

GPA: _____

Experience:

Areas of Interest:

Honors/ Awards:

Leadership/Service Activities:

Special Skills:

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

YES

NO

I will be responsible for familiarizing myself with all the rules and regulations of the District as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of the District or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement.

YES

NO

I also understand that no representative of the Tualatin Valley Water District has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current written agreement signed by the General Manager.

YES

NO

I have read, understand and agree with the above.

Signature of Applicant

Date