WATER AND SEWERAGE CORPORATION

SUMMER EMPLOYMENT APPLICATION

Photo

This application form should only be completed for Summer or Seasonal employment with WSC.

1. Read over the entire application before you begin to complete it.
2. Application Deadline is May 15 (for any year). Application submitted after this date, subject to space availability.
3. All applicants must be
    a. A minimum of sixteen (16) years old, on the day of submittal
    b. Currently enrolled in high school, college, or university, to be considered for acceptance into the program.

SECTION I (PERSONAL DATA)

Name (Ms. /Mr.):_____

Date of Birth (dd/mm/yy):_____   Age (last birthday):_____

National Insurance Number:_____   Sex: ☐ Male ☐ Female

Nationality:_____   Place of Birth:_____

Address: House No._____Street Name:_____   Subdivision_____

P.O. Box:_____   Email Address:_____

Telephone Contact: Home#:_____   Cell Phone#:_____

Parent / Guardian Information

Mother's Name:_____   Father's Name:_____

Address:_____   Address:_____

Home No.:_____   Home No.:_____

Cell No.: _____   Cell No.:_____

Work No._____   Work No._____

Person to contact in case of Emergency:_____

SECTION 2 – EDUCATIONAL INFORMATION

High School Attending (Name / Address):_____

Present Grade Level:		Date of Graduation:	
Certificates to Date	**B.J.C's**	**B.G.C.S.E'S**	**Other**

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TRADE SCHOOL / COLLEGE / UNIVERSITY INFORMATION:

School Name (Trade College/University):_____   Date of Graduation: _____

Address:_____

Major Area (s) of Study:_____

Total Number of Credits to date:_____   Current G.P.A:_____

Special Skills / Certificates (list below)_____

_____

_____

_____

_____

EMPLOYMENT HISTORY

Previously employed with the Corporation: ☐ YES   ☐ NO

Year	Department

OTHER EMPLOYMENT HISTORY

Company	Year	Duties Assigned	Department

Do you have any immediate family members currently employed at WSC?   ☐ YES   ☐ NO

If Yes, pl provide Name (s) / Relationship:_____

Please attach the following documents to this application form:

* National Insurance Card (Both Sides),

* First Four (4) Pages of your Passport, Passport Size Photo

I hereby certify that the information in this application is true and correct. I understand that the falsification of any information contain therein, could result in the application being null and void, or dismissal, if engaged.

SIGNATURE:_____   DATE:_____

For Official Use Only

Sponsored by_____