



Water Authority - Cayman
"Suppliers of the World's Most Popular Drink"

WORK EXPERIENCE APPLICATION FORM

APPLICATION DEADLINE:

30 APRIL

Please submit the completed application and any/all required submittals to the Chief Human Resources Manager either **by e-mail** to HR@waterauthority.ky, **by mail** to P.O. Box 1104, Grand Cayman, KY1-1102, CAYMAN ISLANDS, or **by hand** to the Authority's Administrative Headquarters at 13G Red Gate Road, George Town, Grand Cayman.

Applicant Information

Surname	First Name	Middle Initial
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Position Applying For *SUMMER INTERNSHIP*

Mailing Address

Home Telephone No.	Work Telephone No.
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Mobile No.	E-mail
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Date of Birth	Place of Birth	Nationality
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Immigration Status:

Caymanian/Status Holder
 Permanent Resident
 Work Permit Holder
 Visitor
 Other

Education & Training History *(Start with high school, continue on separate sheet if necessary.)*

Education/Training Institution	Dates (From—To)	Qualifications Obtained

Employment History *(Start with most recent, continue on separate sheet if necessary.)*

Name of Employer/Company	Employer Address & Telephone No.	Job Title	Dates Employed (From—To)

PLEASE CONTINUE FORM ON NEXT PAGE

Character References (List 2 persons, excluding family members, who can provide a character reference.)

Name	Address	Telephone No.

Required Documents

Along with this application, please submit the following: Cover Letter Résumé

Additional Information

1. Do you have any health problems or disabilities? Yes No

If "Yes", please give details: _____

2. Do you have a valid Cayman Islands Driver's Licence? Yes No

3. Do you own or have access to a car during work hours? Yes No

4. If selected, what are your preferred start and end dates*?

Start Date _____ End Date _____

* Please note that summer internships typically run from 4 to 8 weeks between 1st June and 31st August. Work hours are Monday through Friday from either 8:00am - 4:30pm or 7:30am - 4:00/4:30pm depending on work placement.

5. Please indicate which departments you are interested in being placed in by ranking your top three choices from 1 to 3, with 1 being "Most interested".

Department	Rank
Water Resources & Quality Control	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Operations - Cayman Brac	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Operations - Grand Cayman	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
<i>Please circle preferred division:</i>	
<i>Water Supply</i>	<i>Wastewater</i>
<i>Building & Equipment</i>	

Department	Rank
Engineering Services	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Finance	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Customer Service	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Information Systems	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Human Resources & Administration	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3

I declare that the information I have provided above is correct and true to the best of my knowledge. I understand that failure to disclose relevant details or giving misleading information may result in my application being rejected or if hired, could lead to termination of employment.

Applicant Signature**Date**

Parent/Guardian Signature (If applicant under 18 years.)**Date**