

EMPLOYMENT APPLICATION

The City of Waitsburg is an equal opportunity employer. Employment will be based upon consideration of the qualifications of all applications for employment. The City does not discriminate on the basis of race, color, religion, sex, national origin, age, disability, marital or veteran status, political affiliation or any other legally protected status in employment or in the provision of services.

The City of Waitsburg does not discriminate on the basis of disability in the admission or access to, or treatment of employment in, its programs or activities. Information concerning the provisions of the Americans with Disabilities Act, and the rights provided thereunder, is available at Waitsburg City Hall.

Federal law requires anyone employed by the City to present proof of identity and proof of authorization to work in the United States.

UPON COMPLETION OF THIS FORM, PLEASE RETURN TO:

CITY OF WAITSBURG
P.O. BOX 35
WAITSBURG, WA 99361

1. Date of Application:

2. Position Applied for:

3. Name (Last, First, Middle):

4. Home Address (Physical & Mailing):

5. Home Telephone:

6. Alternate Telephone (Give number where you may be reached, or where a message may be left during normal working hours).

7. Will you accept part-time or temporary employment?

8. At what date would you be available for work?

9. Have you served on active duty in the Military Services of the United States within the last eight years?

_____ Yes _____ No

If yes, give the branch and active duty dates:

10. Have you ever obtained employment in this state through the use of Veterans' Preference?

_____ Yes _____ No

11. Conviction (Conviction of a crime is not an automatic bar to employment. Each case is considered separately.)

Have you been convicted of a felony or served time in prison during the last seven years?

_____ Yes _____ No

If yes, explain each conviction on an attached sheet, and include the date, the charge, the place and the action taken.

12. If applicable to the position for which you are applying, describe your office skills, including data entry, spreadsheet usage, word processor, data base, the usage of ten-key calculator, typing, and any other office skills that may be relevant to the job for which you are applying.

13. Language Skills (Please list any foreign languages spoken or written):

14. Computer Skills (Describe your computer programming and operation skills, including programs used):

15. Equipment Skills (If applicable to the position for which you are applying, describe your equipment operation skills):

16. If required in connection with the job for which you are applying, do you possess a valid Driver's License with appropriate endorsements?

_____ Yes _____ No

17. What is the highest grade or level of formal education you have completed?

18. List the colleges, vocational or technical schools attended, and list the degrees or certificates earned.

19. Provide information relating to any additional education you have received as it may relate to the position for which you are applying.

20. Please describe each certificate or license that you currently hold, the agency that issued it, and the expiration date if applicable, which is required by or may relate to the position for which you are applying.

21. Please list on a separate sheet of paper and attach to this application your employment and salary history, to include: employer's name, address and telephone number, supervisor's name and title, reason for leaving, your title and duties, the number of employees you supervised, the dates your were employed, your monthly salary or wage, your hours worked per week and whether we can contact the employer. Please list each employer you have had within the last eight years, including part-time and full-time employment, and begin with the most recent employer.

I hereby certify that all information on this application is true, and understand that erroneous or misleading information on this application may result in the removal of my name from consideration for employment, or may result in termination of any employment. I understand that this information may be subject to verification.

Date

Signature of Applicant

I authorize all previous employers to furnish the City of Waitsburg my record, reason for leaving and all information they may have concerning me, and I hereby release them and the City of Waitsburg from all liability for any damage whatsoever arising therefrom. (Failure to sign this provision does not bar consideration for employment.)

Date

Signature of Applicant