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| City Of Kelso Application For Employment | | **Human Resources**  **Use Only** |
| City of Kelso  PO Box 819  Kelso, WA 98626 An Equal Opportunity Employer | You must submit a separate application for each position.  Read the Position Opening Announcement to see if a Supplemental Questionnaire is required.  **DO NOT submit a photograph of yourself.** |  |

**The City of Kelso is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, sex, age, color, sexual orientation, religion, national origin, marital status, genetic information, veteran’s status, disability, or any other basis prohibited by federal, state or local law.**

**Complete all information from this point forward. An incomplete Application may disqualify you from further consideration.**

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| **Applicant:** Write the Job # Here | | | | Applicant: Write the Position Title of the Job you are applying for here | | | | | | | | | | | | | | | | | | | | | |
| **Name** |  | | | | | | |  | | |  | | | | | | | | | |  |  | |
|  | (Last) | | | | | | |  | | | (First) | | | | | | | | | |  | (Middle) | |
| **Address** | |  | | | | |
|  | |  | | | | | City |  | | | | | | **State** | |  | | **Zip** | |  | | |
| **Home Phone** | | | ( ) | | **Message** | ( ) | | | | **Work** | | | ( ) | | | | Email | |  | | | | | | |
| **Are you a U.S. citizen, or, do you have a Visa permitting you to work in the U.S.? (Documentation of authorization to work in the US will be required if an offer of employment is made and accepted.)** | | | | | | | | | **Yes**  **No** | | | |  | | Are you over the age of 18?  **Yes  No**  If not, give date of birth:\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |
| **Do you have, or can you obtain, a valid Washington State Driver’s License?** | | | | | | | | | | | | **Yes  No** | | | | | | | | | | | | |
| **Do you wish to claim Veteran’s Preference for testing, pursuant to RCW 41.04.010?** (Police Officer position only) | | | | | | | | | | | | **Yes  No** | | | | | | | | | | | | |

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| **TRAINING AND EDUCATION** |
| **Highest Grade Completed:**  **8**  **9**  **10**  **11**  **12**  **GED** |
| **Colleges/Other Training** **Subject/Major** **Degree/Certificate** **Date Completed** |
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| **EQUIPMENT, OFFICE AND COMPUTER SKILLS** |
| Describe computer and other equipment operation skills. Include programs used, typing speed & other information relevant to the position for which you are applying. |
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| **PROFESSIONAL REFERENCES (Do Not List Relatives)** | | | | | | |
| **Name/Title** |  | **Employer** |  | **Phone** | ( ) |
| **Name/Title** |  | **Employer** |  | **Phone** | ( ) |
| **Name/Title** |  | **Employer** |  | **Phone** | ( ) |

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| **SIGNATURE IS REQUIRED** | | | |
| To the best of my knowledge, the information herein is true and complete. I have read the Position Opening Announcement and I can perform the essential functions of the position for which I am applying, with or without reasonable accommodation. I understand that if I receive a Conditional Offer of Employment for a position where I will have unsupervised access to children, developmentally disabled persons, or vulnerable adults, the City of Kelso is required to complete a thorough background check as required by the Child/Adult Abuse Information Act. I understand that I will be tested for the presence of drugs as part of the pre-employment screening if I receive a Conditional Offer of Employment for a position, which requires a Commercial Driver’s License. I authorize investigation of all statements in this application. I understand that providing false information on this application is grounds for disqualification and/or dismissal. If I am applying for an exempt position, I understand that nothing in this application or my communications with any City of Kelso official is intended to create an employment contract between the City of Kelso and me. | | | |
| **Signature** |  | **Date** |  |

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| **WORK HISTORY** | | | | | | | | | | |
| Beginning with your present or most recent employment, list your work/experience history for the last 10 years or experience prior to that time which is directly related to the position for which you are applying. Attach additional sheets as necessary. Be sure to include any non-paid experience, which is related to the job for which you are applying**. Complete the following sections even if you are submitting a resume** in addition to this application. An incomplete application may disqualify you. If you have been known by a different name by any of these employers, please identify the employer and state the name here : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | |
| **Employer's Name** |  | | | **From** | **Mo/Year** | | **To** | | **Mo/Year** | |
| **Address** |  | | | **Supervisor** | |  | | | | |
| **Phone** |  | | | **Hours Worked Per Week** | | | |  | | |
| **Position** |  | | | **Start Salary** | |  | | | | |
| **Number Of Employees Supervised By You** | | |  | **Last Salary** | |  | | | | |
| **Reason For Leaving** | |  | | | | | | | | |
| **Primary Duties** | |  | | | | | | | | |
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| **Employer's Name** |  | | | **From** | **Mo/Year** | | **To** | | **Mo/Year** | |
| **Address** |  | | | **Supervisor** | |  | | | | |
| **Phone** |  | | | **Hours Worked Per Week** | | | |  | | |
| **Position** |  | | | **Start Salary** | |  | | | | |
| **Number Of Employees Supervised By You** | | |  | **Last Salary** | |  | | | | |
| **Reason For Leaving** | |  | | | | | | | | |
| **Primary Duties** | |  | | | | | | | | |
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| **Employer's Name** |  | | | **From** | **Mo/Year** | | **To** | | **Mo/Year** | |
| **Address** |  | | | **Supervisor** | |  | | | | |
| **Phone** |  | | | **Hours Worked Per Week** | | | |  | | |
| **Position** |  | | | **Start Salary** | |  | | | | |
| **Number Of Employees Supervised By You** | | |  | **Last Salary** | |  | | | | |
| **Reason For Leaving** | |  | | | | | | | | |
| **Primary Duties** | |  | | | | | | | | |
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| **Employer's Name** |  | | | **From** | **Mo/Year** | | **To** | | **Mo/Year** | |
| **Address** |  | | | **Supervisor** | |  | | | | |
| **Phone** |  | | | **Hours Worked Per Week** | | | |  | | |
| **Position** |  | | | **Start Salary** | |  | | | | |
| **Number Of Employees Supervised By You** | | |  | **Last Salary** | |  | | | | |
| **Reason For Leaving** | |  | | | | | | | | |
| **Primary Duties** | |  | | | | | | | | |
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|  | **CITY OF Kelso**  **PO Box 819**  **Kelso, WA 98626** |

**AUTHORIZATION TO RELEASE EMPLOYMENT RECORDS**

**References will only be checked for finalists.**

Current and/or prior employers will only be contacted after an applicant has been notified that they are a finalist.

I certify that the information given by me to the City of Kelso is true and complete to the best of my knowledge. I understand that falsification of this application will be grounds for elimination from further consideration or, if employed, may result in immediate dismissal.

I further certify that I am not engaged in any outside activity or business that could be considered in conflict with City of Kelso interest or those of its clients, nor will I become engaged in such activity or business if employed.

I, the undersigned applicant for employment with the City of Kelso, in consideration of the review of my employment application, do authorize the City of Kelso to solicit information regarding my character, general reputation, previous employment, and similar background information, and to contact any and all references I have given on my application. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the furnishing of such information. If employed, I release the City of Kelso from any liability for future references it may provide regarding my work history at the City of Kelso.

If employed, I further agree that if I lose, damage, or fail to return any of the City of Kelso’s property, the City of Kelso is authorized to deduct from my wages sufficient funds to replace its property.

It is my intention that any copy of this authorization be as effective as the original.

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| Date |  |
| Name (Please Print) |  |
| Signature |  |

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|  | **CITY OF Kelso**  **PO Box 819**  **Kelso, WA 98626** |

**DRIVING RECORD**

**(To be completed with application)**

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

**Please Print** Last First MI

***List all notices of infractions or traffic citations (other than parking tickets), which you have received in the past 5 years.***

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| --- | --- | --- |
| **State** | **Month/Year** | **Type of Infraction** |
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Infractions or citations will not necessarily remove you from consideration. The City will; however, consider your driving record when making employment decisions.

The information provided above is true to the best of my knowledge. I understand that providing false information is cause for elimination in the selection process or dismissal from employment.

Signed: Date:

**Finalists, upon notification that references will be checked, will be required to submit a copy of their driving abstract to Human Resources.** Driving abstracts may be obtained at any Washington State Department of Licensing branch office for a small fee. Other states may have different procedures. This fee is at the Finalist’s own expense.

**City Driving Standards:**

Applicants for positions in which the occupant is expected to operate a motor vehicle must be at least 18 years old and will be required to present a valid Washington State driver's license with any necessary endorsements. Driving records of applicants may be checked. Applicants will be disqualified under the following circumstances:

* Violations  
  More than two moving traffic violations within the preceding three years; or reckless driving violation within the preceding five years; or driving while intoxicated within the preceding five years.
* Accidents  
  More than one motor vehicle accident within the preceding three years for which the applicant received a traffic or criminal citation and was convicted, forfeited bail, or entered a plea of "guilty" or "nolo contendere."

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| **🖝 THIS PAGE WILL BE REMOVED FROM THE APPLICATION AND KEPT SEPARATELY** |

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

**Please Print** Last First MI

**Job #:\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Are you a former or current City of Kelso Employee?** | |
| Yes  No If Yes, please tell us: | |
| When you worked |  |
| Department |  |
| Position Title |  |
| Supervisor |  |

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| **Having a relative employed by the City will not necessarily bar you from employment.** | |
| Do you have any relatives employed by the City?  Yes  No | |
| If yes, Please list their name/s and relationship/s |  |

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| **We would appreciate completion of the Affirmative Action information below. This is entirely voluntary. The City of Kelso is committed to non-discrimination in employment practices. This information will be kept confidential and will be used for Affirmative Action record keeping purposes only.** | | | |
| Sex | Female  Male | | |
| Ethnic Category (Check one) | | Caucasian  African American  Hispanic  Asian  Pacific Islander  Alaskan Indian  Native American Other | |
| **Please tell us how you learned of this opening by circling the number of the source** | | | |
| Seattle Times/PIWork Source 3. The Daily News City of Kelso (Job line/TV/Walk in)Internet (general)Vancouver Columbian 6. Tacoma News  7. Oregonian  8. Spokesman Review  9. Jobs Available  10. AWC job Net | | | 11. Municipal Office  12. Library  13. School/College  14. Friend/Relative  15. City of Kelso Employee  16. Professional Publications/Internet Site  17. Law Enforcement Digest  18. The Chronicle  19. KLTV  20. Other |

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| **APPLICATION ASSEMBLY and HIRING PROCESS:** |
| **Assemble application materials in this order**: **1**: City of Kelso Application Front Page, **2**: Work History, **3**: Supplemental Questionnaire (***if required***), **4**: Authorization To Release Employment Records, **5**: Driving Record. **6**: The following optional items may follow in this order: cover letter, resume, reference list, etc. Please make **7**: this sheet the LAST **PAGE,** as it will be removed. Staple everything together in the top left corner**.**  Those applicants who submit a complete and timely application and are invited to participate in the testing and/or interview stages of the selection process will be notified by phone, email, or mail. Those who are not will be notified by mail. Incomplete or late applications will not receive notification. Application screening is scheduled to begin on the first business day following the closing date and may take 5-10 business days.  ***Thank you for considering us as your prospective employer.*** |