

Employment Application
The City of Woodland is an Equal Opportunity Employer

Office of the Clerk/Treasurer
 230 Davidson Avenue / P.O. Box 9
 Woodland, WA. 98674
 360/225-8281, Fax 360/225-7336
 E-mail: rippm@ci.woodland.wa.us

Instructions: Type or legibly print this application using dark ink only. Sign and date the application. An incomplete application or an application which states "SEE RESUME" may disqualify you from further consideration.

GENERAL INFORMATION			
Desired Position:		Social Security Number:	
Last name	First name	Middle name	
Address		City	State Zip
Home Phone ()	Work Phone ()	Cell Phone ()	E-Mail Address
Washington State labor laws restrict some employment from persons under 18 years old. Are you at least 18 years old? YES <input type="checkbox"/> NO <input type="checkbox"/> <i>IF NO</i> , what is your birth date? / /			
Are you legally eligible for employment in the United States? YES <input type="checkbox"/> NO <input type="checkbox"/>		Are you a United States citizen? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Are you now, or have you ever been employed by the City of Woodland? YES <input type="checkbox"/> NO <input type="checkbox"/>		<i>If YES</i> , give job title:	Department:
Will you accept: <i>(Check all that apply)</i> <input type="checkbox"/> Regular <input type="checkbox"/> Temporary <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time		Shifts you will accept: <input type="checkbox"/> Day <input type="checkbox"/> Evening <input type="checkbox"/> Night <input type="checkbox"/> Weekend	Dates of employment: Date you can start:
Is there anything that will prevent you from performing the essential functions of the position or positions for which you are applying with or without reasonable accommodation? If so, please explain:			
Have you been convicted of a felony or criminal offense within the past seven (7) years? If so, please explain:			
Have you worked under a different name for any employer listed on this application? If so please identify the name that you were known by, and the employer.			
How long have you lived at your current address?			
If less than 2 years, please provide previous address:			
Do you possess a valid Washington State Drivers License? YES <input type="checkbox"/> NO <input type="checkbox"/>		Do you have relatives employed by the City? YES <input type="checkbox"/> NO <input type="checkbox"/>	

VETERAN'S PREFERENCE – (Civil Service Positions Only)
Civil Service positions allow veteran's preference in accordance with Washington State law to veterans honorably released from active military service within the last eight (8) years. Do you claim veteran's preference? YES <input type="checkbox"/> NO <input type="checkbox"/> <i>IF YES</i> , please attach form DD214 and complete the following items: Are you retired from military service? YES <input type="checkbox"/> NO <input type="checkbox"/> All dates of active duty: From / / to / /

EDUCATION			
Did you graduate from high school? YES <input type="checkbox"/> NO <input type="checkbox"/> Or receive a GED certificate? YES <input type="checkbox"/> NO <input type="checkbox"/>			
Name of College, University, Vocational School, etc.	Major	Years Completed	Degree Title
Indicate any other trades, skills or licenses/certificates you possess related to the position. Include licensing and state expiration.			

BUSINESS REFERENCES – (Three Required)			
Name	Address	Phone Number	Years Acquainted
		()	
		()	
		()	

PERSONAL REFERENCES – (Three Required)			
Name	Address	Phone Number	Years Acquainted
		()	
		()	
		()	

EMPLOYMENT HISTORY

List your work experience, starting with the most recent. Include self-employment, military service, and volunteer work. Attach additional sheets if necessary. Be as complete as possible outlining the duties of each position. Failure to do so may affect credit you receive for experience. ***A resume will not substitute for information required in this section.***

MOST RECENT POSITION		Dates Employed: / to / Hours per Week Final Salary May we contact your current employer? YES <input type="checkbox"/> NO <input type="checkbox"/>
Employer		
Address		
Position	No. of employees supervised:	
Supervisor	Phone number ()	
Specific Duties		
Reason for leaving:		

OTHER EXPERIENCE		Dates Employed: / to / Hours per Week Final Salary
Employer		
Address		
Position	No. of employees supervised:	
Supervisor	Phone number ()	
Specific Duties		
Reason for leaving:		

OTHER EXPERIENCE		Dates Employed: / to / Hours per Week Final Salary
Employer		
Address		
Position	No. of employees supervised:	
Supervisor	Phone number ()	
Specific Duties		
Reason for leaving:		

AGREEMENT, CERTIFICATION, AND AUTHORIZATION

I hereby certify under the penalty of perjury in the state of Washington that this application contains no willful misrepresentation and that the information given is true and complete to the best of my knowledge and belief. I am aware that should an investigation at any time disclose any such misrepresentation or falsification, my application may be rejected, my name may be removed from consideration or I may be discharged from my employment.

I authorize my current or former employers and all schools or educational and technical institutions which I have attended to the City of Woodland representatives and information regarding my current or former employment, scholastic records or ratings. I hereby release any such current or former employers or institutions, their agents or employees from any and all liability resulting from the release of such information. My authorization and release from liability are knowing, intelligent and voluntary acts.

I am willing to submit to a pre-employment drug screen if required. I understand that as a condition of employment I must provide documentation to prove my eligibility to obtain employment along with personal identification information as required by the Immigration Reform and Control Act of 1986.

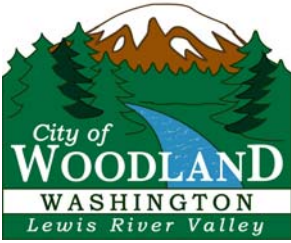
I also authorize the City to supply information about my employment record, in whole or in part in confidence to any prospective employer, government agency or any other party which have a legal and proper interest, and I hereby release the City from any and all liability for providing this information.

I understand that this application is not intended to be a contract of employment. Many city positions are governed by collective bargaining agreements, which specify terms of employment. Employment for all positions not covered under collective bargaining agreements is "at will." This means that either party can terminate the employment relationship at any time, with or without cause or advance notice.

Signature of applicant

Date

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Equal Employment Opportunity Questionnaire **OPTIONAL**

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The following information is necessary for the City to evaluate its hiring practices and to prepare reports required by law for the State and Federal governments. This form will be detached from the employment application. This information is CONFIDENTIAL and will NOT be used to make a decision about your employment.

Gender: Male Female

Date of birth: / /

Ethnic Group: Please check the one box which best identifies you.

Caucasian (white). All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Black. All persons having origins in any of the Black racial groups of Africa.

American Indian. All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.

Asian or Pacific Islander. All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. These include, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.

Hispanic. All persons of Mexican, Puerto Rican, Cuban, Central or South American, or the Spanish culture or origin regardless of race.

Please tell us how you heard about this position:

Acquaintance/City Employee The Reflector The Daily News The Columbian The Skanner

City Website or Internet Bulletin Board Other:

This information will be detached from your application and kept separate and confidential.