

APPLICATION FOR EMPLOYMENT



City of Bandon
P.O. Box 67, Bandon, OR 97411
(541) 347-2437, (541) 347-1415 Fax

The City of Bandon considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

(PLEASE PRINT)

Position(s) Applying For		Date of Application	
How Did You Learn About Us? <input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Friend <input type="checkbox"/> Inquiry <input type="checkbox"/> Online Job Posting <input type="checkbox"/> Employment Agency <input type="checkbox"/> Relative <input type="checkbox"/> City Website <input type="checkbox"/> Other _____			
Last Name		First Name	
		Middle Name	
Street Address		City	
		State	
		Zip Code	
Mailing Address (leave blank if same as above)		City	
		State	
		Zip Code	
Telephone Number(s):		Social Security Number	

Best time to contact you at home is:	____:____ <small>AM PM</small>
If you are under 18 years of age, can you provide required proof of your eligibility to work?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever filed an application with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, give date _____	
Have you ever been employed with us before?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, give date _____	
Do any of your friends or relatives, other than spouse, work here?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, state name, relationship and location _____	
Are you currently employed?	<input type="checkbox"/> Yes <input type="checkbox"/> No
May we contact your present employer?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? <i>Proof of citizenship or immigration status will be required upon employment.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date available for work ____/____/____ What is your desired salary range? _____	
Are you available to work: <input type="checkbox"/> Full Time (Please indicate: 1 2 3 shift) <input type="checkbox"/> Part Time (Please indicate: Mornings Afternoon Evenings) <input type="checkbox"/> Temporary (Please indicate dates available: ____/____/____ - ____/____/____)	
Are you currently on "lay-off" status and subject to recall?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Can you travel if a job requires it?	<input type="checkbox"/> Yes <input type="checkbox"/> No

EDUCATION

School	Name and Address of School	Course of Study	Years Completed	Diploma/ Degree
High School				
Undergraduate College				
Graduate/Professional				
Other (Specify)				

WORK EXPERIENCE

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, disabilities or other protected status.

Employer: Address: Phone Number: Title: Reason for Leaving:	Dates Employed		Work Performed
	From	To	
	Hourly Rate/Salary		
	Starting	Ending	
	May We Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Employer: Address: Phone Number: Title: Reason for Leaving:	Dates Employed		Work Performed
	From	To	
	Hourly Rate/Salary		
	Starting	Ending	
	May We Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Employer: Address: Phone Number: Title: Reason for Leaving:	Dates Employed		Work Performed
	From	To	
	Hourly Rate/Salary		
	Starting	Ending	
	May We Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Employer: Address: Phone Number: Title: Reason for Leaving:	Dates Employed		Work Performed
	From	To	
	Hourly Rate/Salary		
	Starting	Ending	
	May We Contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Additional Work Experience Comments. *Include explanation of any gaps in employment.*

Describe any specialized training, apprenticeship, skills and extra-curricular activities.

Describe any job-related training received in the United States military.

List professional, trade, business or civic activities and offices held. *You may exclude membership which would reveal gender, race, religion, national origin, age, ancestry, disability or other protected status:*

Summarize any other job-related qualifications acquired from employment of past experience.

SPECIALIZED SKILLS (Skills/Equipment Operated)

<input type="checkbox"/> Terminal	<input type="checkbox"/> Spreadsheet	Production/Mobile Machinery (list)	Other (list)
<input type="checkbox"/> PC./MAC	<input type="checkbox"/> Word Processing	_____	_____
<input type="checkbox"/> Typewriter	<input type="checkbox"/> Shorthand	_____	_____
WPM _____	WPM _____	_____	_____
State any additional information you feel may be helpful in considering your application.			
Are you capable of performing in a reasonable manner, with or without a reasonable accommodation, the activities involved in the job or occupation for which you have applied? A review of the activities involved in such a job or occupation has been given. <i>NOTE: Do not answer this question unless you have been informed about the requirements of the job for which you are applying.</i>			
<input type="checkbox"/> YES <input type="checkbox"/> NO			

VETERAN INFORMATION

Do you meet the definition of a veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO
<i>This is a voluntary question; however, if you are interested in veteran hiring consideration, we will need to know your veteran's status. A veteran is defined as: (1) A veteran must have served on active duty with the Armed Forces of the United States for a period of more than 90 consecutive days beginning January 31, 1955 or 178 consecutive days beginning after January 31, 1955, and have been discharged under honorable conditions; or (2) A veteran must have served on active duty with the Armed Forces of the United States for 178 days or less and have been discharged under honorable conditions because of a service-connected disability (disabled veteran); or (3) A veteran must have served on active duty with the Armed Forces of the United States for at least one day in a combat zone and have been discharged under honorable conditions; or (4) A veteran must have received a qualifying military decoration for service in the Armed Forces of the United States; or (5) Be receiving a nonservice-connected pension from the U.S. Department of Veteran Affairs. A veteran may submit his/her Certificate of Release or Discharge from Active Duty (a federal DD form 214 or 215) with his/her application for employment.</i>
Do you meet the definition of a disabled veteran? <input type="checkbox"/> YES <input type="checkbox"/> NO
<i>This is a voluntary question; however, if you are interested in veteran hiring consideration, we will need to know your veteran's status. A disabled veteran is defined as: (1) Entitled to disability compensation under laws administered by the U.S. Department of Veteran Affairs; or (2) Discharged or released from active duty for a disability incurred or aggravated in the line of duty; or (3) Awarded the Purple Heart for wounds received in combat. A disabled veteran may submit a copy of his/her veteran's disability preference letter from the U.S. Department of Veteran Affairs with his/her application for employment.</i>

PERSONAL/PROFESSIONAL REFERENCES *Do not include family members or past supervisors.*

Name	Phone Number	Best Time to Call	Occupation
1.			
2.			
3.			

APPLICANT'S STATEMENT

I hereby certify that I understand that I will have to produce documentation verifying identity and employment eligibility in the United States. I understand that I may be required to verify any and all information given on this application.

I certify that all the information provided in this application is true and accurate and I have not withheld information relative to my application. I understand that any misrepresentation or omission, as well as any misleading statements or omissions of application information, attachments or supporting documents may result in denial of employment or immediate termination.

I understand that an in-depth background check may be conducted prior to employment with the City of Bandon. This may include, but is not limited to, a Criminal History check, a DMV check, education and certification verification, and contact with previous employers and referenced in order to determine suitability for employment and ability to qualify for employment with the City of Bandon.

I authorize representatives of the City of Bandon to contact the employers and references listed in this application (or otherwise provided by me), except as otherwise indicated, and any other person as developed through these contacts in order to determine my suitability for employment. I understand that as the process progresses I may be required to provide additional information in order that a thorough background check can be completed. I understand and agree that, if hired, my employment relationship with the City of Bandon will be "at-will," meaning for no definite period and the relationship may be terminated at any time and without prior notice by either party. I understand that this completed application is the property of the City of Bandon and will not be returned. I understand that I must notify the Human Resources department of the City of Bandon of any changes in my name, address, or phone number.

I have read and understand the above information.

Signature of Applicant

Date

THE CITY OF BANDON IS AN EQUAL OPPORTUNITY EMPLOYER.