



# City of Stevenson

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7121 E Loop Road, PO Box 371  
Stevenson, Washington 98648  
<https://www.facebook.com/ci.stevenson.wa.us/>

## Application for Employment

The City of Stevenson is an Equal Opportunity Employer and does not discriminate on the basis of race, sex, age, color, religion, national origin, marital status, disability or any other basis prohibited by federal, state or local law. In compliance with the Americans with Disabilities Act, disability will be considered only in the context of the applicant's ability to perform essential functions of the job and to determine reasonable accommodation. The City is a drug free workplace.

Name: \_\_\_\_\_  
(Last) (First) (Middle)

Other Name Known By: \_\_\_\_\_  
(Last) (First) (Middle)

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone Number: (Home/Cell) \_\_\_\_\_ (Daytime Phone) \_\_\_\_\_

Position(s) Applying for: \_\_\_\_\_

Desired Salary: \_\_\_\_\_

How were you referred to the City of Stevenson? \_\_\_\_\_

Give the names and relationships of any relatives you have working for the City of Stevenson. |Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
|Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Can you perform the essential functions of the position, or positions, for which you are applying with or without reasonable accommodation? (See Job Description) Yes [ ] No [ ]

Do you possess a Driver's License? Yes [ ] No [ ]

Do you possess a CDL? Yes [ ] No [ ] Type: \_\_\_\_\_ Endorsements: \_\_\_\_\_

Have you ever been bonded: Yes [ ] No [ ]

Can you travel if the job requires it? Yes [ ] No [ ]

Are you prevented from lawfully working in the United States by visa or immigration status? Yes [ ] No [ ] (Documentation of authorization to work in the US. will be required if an offer of employment is made and accepted).

Are you at least 18 years of age? Yes [ ] No [ ]

Have you served in the US Armed Forces: Yes [ ] No [ ]

Work Experience History

Beginning with your present or most recent employer, list your prior work experiences. Include periods of self-employment and US Military experiences. List each promotion separately. If all of the requested information is contained in your resume in great enough detail, the note "See Resume" is an acceptable response.

1. Employer: \_\_\_\_\_ Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Number of people supervised, if any: \_\_\_\_\_  
 Duties Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact them if you become a finalist for this position? Yes [ ] No [ ]

2. Employer: \_\_\_\_\_ Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Number of people supervised, if any: \_\_\_\_\_  
 Duties Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact them if you become a finalist for this position? Yes [ ] No [ ]

3. Employer: \_\_\_\_\_ Employed From: \_\_\_\_\_ To: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Job Title: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
 Number of people supervised, if any: \_\_\_\_\_  
 Duties Performed: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact them if you become a finalist for this position? Yes [ ] No [ ]

*(If you need additional space, please continue on a separate sheet of paper.)*

Education, Training, Certificates and Licenses

High School Diploma or GED? Yes [ ] No [ ]

1. Name of School: \_\_\_\_\_  
 Location of School: \_\_\_\_\_  
 Major Subject: \_\_\_\_\_  
 Number of Years or Credits Completed: \_\_\_\_\_  
 Degree or Certificate Earned: \_\_\_\_\_

2. Name of School: \_\_\_\_\_

Location of School: \_\_\_\_\_

Major Subject: \_\_\_\_\_

Number of Years or Credits Completed: \_\_\_\_\_

Degree or Certificate Earned: \_\_\_\_\_

3. Name of School: \_\_\_\_\_

Location of School: \_\_\_\_\_

Major Subject: \_\_\_\_\_

Number of Years or Credits Completed: \_\_\_\_\_

Degree or Certificate Earned: \_\_\_\_\_

**PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION**

The facts set forth in my application of employment are true and complete. I understand false statements on this application will result in my disqualification as an applicant, or, if I am employed, will be cause for my dismissal.

I authorize the City of Stevenson to investigate all statements in this application and to secure any necessary information from all my employers, references, and academic institutions. I hereby release all employers, references, academic institutions, and the City from any and all liability arising from their giving or receiving information about my employment history, my academic credentials or qualifications, and my suitability for employment with the City.

I understand that if I apply for a safety sensitive position, a conditional job offer will be contingent upon successful completion of a drug screening, and I could be subject to random testing after hire.

In the event of my employment with the City of Stevenson, I will comply with all rules, regulations and policies set forth in the City's policy manual or communications distributed by the City as they presently exist or are later modified.

I Hereby acknowledge that I have read and understand the preceding statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_