



Philomath

OREGON

980 Applegate Street / PO Box 400
Philomath, OR 97370
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www.ci.philomath.or.us

EMPLOYMENT APPLICATION

The City of Philomath is an Equal Opportunity/Affirmative Action Employer. We are dedicated to a policy of non-discrimination in employment on the basis of race, color, religion, sex, national origin, age, mental or physical disability.

DIRECTIONS: Please print or type. Supply an answer to every question. If a question is not applicable to you, write N/A in the blank. If additional space is needed, attach additional sheets.

DO NOT misstate or omit material facts. The statements made herein are subject to verification to determine your qualifications for employment. False statements or omission of pertinent facts may preclude you from employment.

1. Position Applied for: _____ Application Date: _____

2. Name: _____

3. Address: _____ City: _____

State: _____ Zip Code: _____

Mailing Address (if different) _____ City: _____

State: _____ Zip Code: _____

4. Contact Phone: _____ Email: _____

5. For police officer positions only: Are you at least age 21? Yes No
Are you a United States citizens? Yes No

6. Are you a Qualified Veteran? Yes No

If you are a qualified veteran and would like to be granted preference in the selection and hiring process, please provide a copy of form DD-214 or 215 with your application.

7. Education

SCHOOL	NAME and CITY	GRADUATED		# of YEARS COMPLETED	DIPLOMA/ DEGREE
		Y	N		
High School/ GED		Y	N		
College		Y	N		
Trade/Business		Y	N		

8. Licenses and Certificates

List any relevant professional licenses or certifications, including Oregon Commercial Driver's License or Oregon Driver's License. For those positions which require a driver's license, driving records may be reviewed:

Description	Issuing State/Agency	ID Number	Expiration Date

9. List any specialized skills or knowledge such as computer programs, languages, or other special skills you have that may be pertinent to the position for which you are applying:

10. Personal / Profession References

Please do not list family members or past supervisors.

Name Phone # Occupation

1. _____
2. _____
3. _____

11. Employment History

Please print additional sheets for employment history (page 4) as needed, beginning with your present or most recent job.

<u>Employer Name & Address:</u>	<u>Dates Employed:</u> From: _____ Month Year To: _____ Month Year Hours Per Week: _____	<u>Hourly Rate/Salary:</u> Start: \$ _____ Final: \$ _____
<u>Job Title:</u>	<u>Supervisor's Name & Title:</u>	<u>Telephone No.:</u>
<u>Specific Duties:</u>		
<u>Reason for Leaving:</u>		
If you still work here, may we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

<u>Employer Name & Address:</u>	<u>Dates Employed:</u> From: _____ Month Year To: _____ Month Year Hours Per Week: _____	<u>Hourly Rate/Salary:</u> Start: \$ _____ Final: \$ _____
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<u>Specific Duties:</u>		
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If you still work here, may we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

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<u>Specific Duties:</u>		
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<u>Employer Name & Address:</u>	<u>Dates Employed:</u> From: _____ Month Year To: _____ Month Year Hours Per Week: _____	<u>Hourly Rate/Salary:</u> Start: \$ _____ Final: \$ _____
<u>Job Title:</u>	<u>Supervisor's Name & Title:</u>	<u>Telephone No.:</u>
<u>Specific Duties:</u>		
<u>Reason for Leaving:</u>		
If you still work here, may we contact this employer? Yes <input type="checkbox"/> No <input type="checkbox"/>		

Include explanation of any gaps in employment: _____

12. List any other prior experience, whether paid or volunteer, relating to the duties of the position for which you are applying.

I hereby certify that this application contains no misrepresentation or falsification, and that the information given is true and complete to the best of my knowledge and belief. I understand that misrepresentation or omission of any information requested by this application is cause for cancellation of the application and/or dismissal from employment.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

Signature: _____

Date: _____