



EMPLOYMENT APPLICATION

City of Vernonia Police Department

1001 Bridge St. Vernonia, OR 97064
Phone (503) 429-7335 Fax# (503) 429-5141

The City of Vernonia is an Equal Opportunity Employer and considers applicants for all positions without regard to race, color, religion, national origin, age, sex, marital or veteran status, disability, or any other legally protected status. All selection decisions are based on job related factors.

Position Applied For: _____ Date of Application: _____

PLEASE PRINT OR TYPE

PERSONAL INFORMATION				
Last Name	First Name	Middle	Home Phone	Message Phone
Address		Apt. #	PO Box	Business Phone
City	State	Zip	Social Security Number	
Are you legally eligible for employment in the USA? Yes <input type="checkbox"/> No <input type="checkbox"/>		Do you have a high school diploma or GED certificate? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you over the age of 20? Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you ever been convicted of a felony? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain the conviction:*				
Criminal convictions are not an absolute bar to employment but will only be considered in relation to specific job requirements.*				

EDUCATION AND TRAINING			
Please include any training relative to the position you are applying for:			
Colleges, Vocational or Technical Schools, Training Centers	Course of Study	Number of Years Completed	Type of Degree or Certificate Received

LICENSES AND CERTIFICATES REQUIRED FOR THIS POSITION			
Description	Issued by	ID #	Expiration Date

PERTINENT SPECIAL SKILLS
Please list experience with machines, office equipment, languages, or other special skills pertinent to the position for which you are applying.

ADDITIONAL INFORMATION
Do you possess a valid driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No (A valid driver's license is required when stated on the job announcement.)
State: _____ Driver's License #: _____

WORK EXPERIENCE

Beginning with your present or last job (and working backward) list all Work Experience including Military, Volunteer and Intern Experience.
(If more space is needed use Additional Work Experience Sheet)

Name of Present or Last Employer		Address	
Starting Date	Leaving Date	Salary \$ per <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time hrs/wk <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern hrs/wk	Reason for Leaving
Month/Year	Month/Year		
Job Title (Present or Last)		Name of Supervisor/Title	
Phone #			

Job Duties:

May we contact this employer? Yes No

Name of Employer		Address	
Starting Date	Leaving Date	Salary \$ per <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time hrs/wk <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern hrs/wk	Reason for Leaving
Month/Year	Month/Year		
Job Title (Present or Last)		Name of Supervisor/Title	
Phone #			

Job Duties:

May we contact this employer? Yes No

Name of Employer		Address	
Starting Date	Leaving Date	Salary \$ per <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time hrs/wk <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern hrs/wk	Reason for Leaving
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Job Title (Present or Last)		Name of Supervisor/Title	
Phone #			

Job Duties:

May we contact this employer? Yes No

APPLICANT ACKNOWLEDGMENT

I understand this application does not represent a contract for employment. I understand that an acceptance of an offer for employment does not create a contractual obligation upon the City of Vernonia to continue to employ me for any period of time in the future. I understand that no representative from the City has any authority to enter into any special agreement with me to promise and/or guarantee my employment for any specific time period or to promise me a promotion or transfer, etc., either prior to commencement of employment or after I have become employed, or to assure me of any benefits or terms and conditions of employment, or to make any agreement contrary to the aforementioned.

I hereby represent that each answer to questions incorporated into this application and all other information otherwise furnished by me shall be true, complete, and correct. I understand that incorrect, incomplete, false, or misleading statements/answers/information furnished by me, either verbally or in writing, will subject my application to disqualification from further consideration and/or if already employed by the City, when the aforementioned is detected, I will be subject to discipline up to and including discharge, for falsifying a City record/document, regardless of how much time has elapsed since the date I was employed. In the event that I am employed by the City, I agree to comply with all its orders, rules, regulations, safety policies and performance standards. Within not more than three (3) days of employment, I will provide proof as required on the US Government, I-9 Form, that I am legally eligible for employment in the United States. If I cannot provide such proof in accordance with Federal Law, I understand that I will be terminated.

I have read and understand all of the provisions of this acknowledgment. By signing this application, I hold the City of Vernonia harmless for any result of the reference check. I hereby authorize and release from liability all former employers, educational institutions, law enforcement agencies, and/or other government agencies to provide/release information regarding my employment, education, criminal conviction record, credit history, driver's license violations and motor vehicle records, that may be in their possession to the City of Vernonia and/or its agents. An offer of employment in conditioned upon several criteria, including my satisfactorily passing certain laboratory test(s) (including tests for substance abuse) which may be required by the City of Vernonia.

Applicant's Signature: _____ Date Signed: _____

City of Vernonia

EQUAL OPPORTUNITY EMPLOYMENT INFORMATION

The City of Vernonia is subject to various state and federal rules and regulations requiring non-discrimination in employment. Pursuant to these rules and regulations, the City of Vernonia hereby invites you to voluntarily provide information regarding your race/ethnic composition, gender and age.

The City of Vernonia is an equal opportunity employer. All employment decisions are based on qualifications and are made without regard to race, color, religion, national origin, age, sex, disability status, veteran status, marital status and any other legally protected status. As required by law, any information that you provide on this form will be treated as confidential and will be stored separate from all personnel information. This information will be used only to demonstrate compliance with applicable state and federal rules and regulations.

Position Applied For: _____ Sex: Female Male

Age: _____

RACIAL CATEGORY	
<input type="checkbox"/> WHITE/CAUCASIAN (not of Hispanic origin)	All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.
<input type="checkbox"/> BLACK (not of Hispanic origin)	All persons having origins in any of the racial groups of Africa
<input type="checkbox"/> HISPANIC	All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.
<input type="checkbox"/> AMERICAN INDIAN-ALASKAN NATIVE	All persons having origins in any of the original peoples of North America who maintain cultural identification through tribal affiliation or community recognition as an American Indian or Alaskan Native.

HANDICAPPED

Do you consider yourself mentally or physically disabled? YES NO

If yes explain: _____

VOLUNTARY COMPLETION BY APPLICANT NOT FOR INTERVIEW PURPOSES.

RECRUITMENT SOURCE

How did you become aware of this employment opportunity?

- Newspaper Which newspaper? _____
- City Employment Announcement _____
- City Employee
- State Employment Office
- City Website
- Other Explain: _____

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ADDITIONAL WORK EXPERIENCE

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Month/Year	Month/Year				
Job Title (Present or Last)		Name of Supervisor/Title		Phone #	
Job Duties:					
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Name of Employer			Address		
Starting Date	Leaving Date	Salary \$ per <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time hrs/wk <input type="checkbox"/> Volunteer <input type="checkbox"/> Intern hrs/wk	Reason for Leaving		
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Job Duties:					
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					

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Job Duties:					
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					

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Job Duties:					
May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No					