

OKANOGAN COUNTY

APPLICATION FOR EMPLOYMENT

(Equal Employment Opportunity Employer)

Name

Address

Email Address

Telephone

Date Available for Employment

Position Applying For

If employed and under 18, can you furnish a work permit?	YES	NO
Have you ever been employed by this Employer?	YES	NO
Are you employed now?	YES	NO
May we contact your present employer?	YES	NO

If yes, give name:

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration status?	YES	NO
Do you have a valid driver's license in this state?	YES	NO
Do you have a Commercial Drivers' License?	YES	NO

Class A Class B Class C

Endorsements: (please list)

Can you perform the essential functions of the job(s) for which you are applying?	YES	NO
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Have you pled guilty or been convicted of a felony?	YES	NO
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(Please note that a "YES" answer will not bar you from consideration for employment.)

If yes, please explain;

Okanogan County is an equal employment opportunity employer. All applicants will be considered without regard to age, color, national origin, religion, sex or other protected status in accordance with applicable federal and state equal employment opportunity laws.

EDUCATION

	High School	College	Graduate
School Name			
Years Completed	9 10 11 12	1 2 3 4	1 2 3 4
Course of Study			

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERATIONS

Summarize special skills and qualifications, volunteer activities, military experience, employment or other activities related to the job you are seeking:

REFERENCES

List three (3) non-relatives who are familiar with your qualifications, work history, and ability.

	<u>Name</u>	<u>Occupation/Relationship</u>	<u>Years Known</u>	<u>Telephone</u>
1.				
2.				
3.				

EMPLOYMENT EXPERIENCE

Start with you present or last job. List your last 4 jobs in order. Do not omit any job.

1. CURRENT OR MOST RECENT POSITION:	
Company:	Full Address:
Position:	Length of time in position: Phone Number:
Start date with company:	End date with company:
Your last supervisor:	May we contact him/her regarding your performance?
Starting salary:	Ending salary:
Describe your major job duties in this position:	
Your reason for leaving this position?	

2. PREVIOUS POSITION HELD:

Company:	Full Address:
Position:	Length of time in position: Phone Number:
Start date with company:	End date with company:
Your last supervisor:	May we contact him/her regarding your performance?
Starting salary:	Ending salary:
Describe your major job duties in this position:	
Your reason for leaving this position?	

3. PREVIOUS POSITION HELD:

Company:	Full Address:
Position:	Length of time in position: Phone Number:
Start date with company:	End date with company:
Your last supervisor:	May we contact him/her regarding your performance?
Starting salary:	Ending salary:
Describe your major job duties in this position:	
Your reason for leaving this position?	

4. PREVIOUS POSITION HELD:

Company:	Full Address:
Position:	Length of time in position: Phone Number:
Start date with company:	End date with company:
Your last supervisor:	May we contact him/her regarding your performance?
Starting salary:	Ending salary:
Describe your major job duties in this position:	
Your reason for leaving this position?	

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. IF YOU HAVE ANY QUESTIONS REGARDING THIS STATEMENT, PLEASE ASK THEM BEFORE SIGNING.

I certify that all answers and statements I have made on this application (and resume or other supplementary materials) are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give you complete information and records regarding my employment, education, character and qualifications.

YES NO

I will be responsible for familiarizing myself with all rules and regulations of the Employer as they presently exist or are later modified. I recognize that my employment can be terminated, at the discretion of the Employer or at my option, without notice, at any time, except as specifically set forth in writing in a current individual employment agreement or collective bargaining agreement.

YES NO

I understand that nothing in this application, or in any prior or subsequent written or oral statement, creates a contract of employment or any rights in the nature of a contract. I agree and understand that if I am hired by Employer, my employment will be "at-will", for an indefinite period of time, and may be terminated at any time, with or without cause or notice, at the option of Employer or myself. I also understand that no representative of Employer has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except as specifically stated in a current individual written agreement or collective bargaining agreement.

YES NO

I have read, understand and agree with the above.

Signature of Applicant

Date

APPLICANT AUTHORIZATION FOR RELEASE OF INFORMATION

As an applicant for a position with Okanogan County, I hereby authorize any employers or supervisors, educational institutions, personal references and/or other persons to release information about my work and educational history for use in determining my qualifications for this position. This release of information covers a criminal background check and my employment record in general including information on the following questions:

1. Date of employment;
2. Position held when started and left;
3. The quality of my work;
4. The quantity of my work;
5. My attendance habits (excluding workers' compensation, pregnancy and other protected absences);
6. My relationship with co-workers and supervisors;
7. My attitude toward work (cooperative? positive? etc.);
8. Reason for leaving;
9. Eligibility for re-hire;
10. Strong points;
11. Weak points;
12. Whether I have had outbursts of temper, threatened, provoked fights with or assaulted other, engaged in hostile or violent behavior, have a criminal record or any traits that would present security or safety issues for others
13. Other relevant information regarding my performance, skills, ability, and suitability for employment sought, etc.

All former employers who provide such information are indemnified and released from liability arising from such disclosures.

Signature of Applicant

Date

(Print Name)

OKANOGAN COUNTY DEPARTMENT OF PUBLIC WORKS

SUPPLEMENTAL JOB APPLICATION INFORMATION

NAME:

(If you require more room, please add an additional page)




TRUCK DRIVING

Do you have a Commercial Driver's License?	YES	NO
Class A Class B Class C		
Endorsements:	(please list)	
Do you have a current Medical Examiner's Certificate?	YES	NO
Do you have a current Flagging Card?	YES	NO
Do you have a current First Aid Card?	YES	NO

1. Total years of Truck Driving experience:

Class of Trucks Driven: 6 7 8

Work History:
Employer and Work Performed

<u>Class 6</u> 19,500 - 26,000	
<u>Class 7</u> 26,001 - 33,000	
<u>Class 8</u> 33,001 or over	

LIGHT EQUIPMENT

2. Total years of Backhoe experience (rubber tired/track):

Work History:
Employer and Work Performed:

3. Total years of Excavator experience:

Work History:
Employer and Work Performed:

4. Total Years of Power Brooms/Street Sweepers experience:

Work History:

Employer and Work Performed:

5. Total years of Roller (Double Drum, Single Drum, Grid, Sheep's Foot) experience:

Work History:

Employer and Work Performed:

6. Total years of Chainsaw experience:

Work History:

Employer and Work Performed:

7. Total years of Screening Plant experience:

Work History:

Employer and Work Performed:

8. Total years of Agricultural Equipment experience:

Work History:

Employer and Work Performed:

HEAVY EQUIPMENT

9. Total years of operating Graders:

Work History:

Employer and Work Performed:

10. Total years of operating Scrapers:

Work History:

Employer and Work Performed:

11. Total years of operating Crawler Tractors (Dozing, Skidding, etc.):

Work History:

Employer and Work Performed:

12. Total years of operating Asphalt Equipment (Chip Spreader, Distributors, Pugg Mill):

Work History:

Employer and Work Performed:

13. Total years of operating Loaders (Rubber Tired/Track):

Work History:

Employer and Work Performed:

GENERAL MAINTENANCE AND SAFETY

14. List any experience you have had in Mechanical Repairs and /or Maintenance of Equipment.

15. List any experience you have had in Road Maintenance and Construction:

16. List any experience you have had in Welding:

17. List experience you have had in Traffic Control:

18. List any Supervisory experience you have had:

19. List experience you have had in Safety and Public Relations practices:

20. List any other experience or training you have had that may pertain to the position for which you are applying:

ADDITIONAL INFORMATION