CITY OF UNION GAP, WA
APPLICATION FOR EMPLOYMENT

The City of Union Gap considers applicants for all positions without regard to race, color, religion, sex, national origin, genetic information, sexual orientation, age, marital or veteran status, qualified individual with disability status, or any other protected status. Prior to consideration of hiring, applicants are subject to a background and criminal history check pursuant to RCW 43.43.830 - .845. All applicants are required to complete an application for employment. Please inform if, as a result of a disability, you need accommodation to complete this application. Please do not submit a photo of yourself.

PLEASE PRINT

Position(s) Applied For_____ Date of Application_____

How Did You Learn About Us?

Advertisement_____Friend_____Walk-In_____

Employment Agency_____Relative_____Other_____

_____

Last Name First Name Middle Name

_____

Address Number Street City State Zip Code

_____

Telephone Number(s)

If you are under 18 years of age, can you provide required proof of your eligibility to work? Yes___ No___

Have you ever filed an application with us before? Yes____ No____ If Yes, give date_____.

Have you ever been employed with us before? Yes____ No____ If Yes, give date_____.

Are you currently employed? Yes_____ No_____

May we contact your present employer? Yes_____ No_____ (*Denial may disqualify an applicant from employment*)

Are you prevented from lawfully becoming employed in this country because of Visa or Immigration Status? Yes_____ No_____ (*Proof of citizenship or immigration status will be required upon employment*).

On what date would you be available for work? _____

Are you available to work: Full time_____ Part Time_____ Shift Work_____ Temporary_____

Are you currently on "lay-off" status and subject to recall? Yes_____ No_____

Can you travel if a job requires it? Yes_____ No_____

Do you currently possess all licenses or certifications which are essential or necessary for the job which you are applying? Yes_____ No_____ If no, Please explain:

_____

Have you been convicted of any crimes or released from prison, whichever is more recent, within the last seven years?

Yes_____ No_____

If Yes, please list:

(a) The crime(s)_____

(b) The conviction or release date, whichever is more recent_____

(c) The court(s) in which you were convicted_____

If you are applying for a position involving the operation of a City owned vehicle, please answer the following:

(a) List all traffic infractions or offenses you were found to have committed, or for which you paid a fine, or forfeited bail, within the last ten years.

_____

_____

(b) Do you currently have a valid driver's license? Yes_____ No_____

(c) Do you currently have a valid commercial driver's license? Yes_____ No_____

NOTE: If you have previously been convicted of a crime or traffic infraction, this fact will not necessarily bar you from employment. Although the City may investigate criminal convictions that relate to fitness to perform the job for which you are applying, such convictions will not necessarily bar you from employment. Facts regarding recency and rehabilitation will be considered.

EDUCATION

School Names and Locations:

Elementary School_____

Years completed_____

Diploma/Degree _____

High School_____

Years completed_____

Diploma/Degree_____

Describe Course of Study_____

_____

Undergraduate College/University_____

Years completed_____

Diploma/Degree_____

Describe Course of Study_____

_____

Graduate/Professional_____

Years completed_____

Diploma/Degree_____

Describe Course of Study_____

_____

Describe any specialized training, apprenticeship, skills and extra-curricular activities, job related skills and qualifications acquired from employment or other experience.

_____

_____

_____

Describe any honors you have received_____

_____

State any additional information you feel may be helpful to us in considering your application_____

_____

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_____

REFERENCES

Give name, address, and telephone number of three references who are not related to you and are not previous employers.

1._____

2._____

3._____

Have you ever had any job-related training in the United States military?

Yes_____ **No**_____ **If Yes, Please describe**_____

_____

Are you physically or otherwise able to perform the essential functions of the job for which you are applying, either with or without reasonable accommodation? Yes_____ **No**_____

EMPLOYMENT 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, disabled or other protected status.

1. **Employer**_____ **Length of Service**_____

Address_____

Work Performed_____

Telephone Number(s)_____

Hourly Rate/Salary (Starting)_____ **(Final)**_____

Job Title_____

Reason for Leaving_____

2. **Employer**_____ **Length of Service**_____

Address_____

Work Performed_____

Telephone Number(s)_____

Hourly Rate/Salary (Starting)_____ **(Final)**_____

Job Title_____

Reason for Leaving_____

3. **Employer**_____ **Length of Service**_____

Address_____

Work Performed_____

Telephone Number(s)_____

Hourly Rate/Salary (Starting)_____ **(Final)**_____

Job Title_____

Reason for Leaving_____

4. **Employer**_____ **Length of Service**_____

Address_____

Work Performed_____

Telephone Number(s)_____

Hourly Rate/Salary (Starting)_____ **(Final)**_____

Job Title_____

Reason for Leaving_____

5. **Employer**_____ **Length of Service**_____

Address_____

Work Performed_____

Telephone Number(s)_____

Hourly Rate/Salary (Starting)_____(Final)_____

Job Title_____

Reason for Leaving_____

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

SPECIAL SKILLS AND QUALIFICATIONS

Summarize special job-related skills and qualifications acquired from employment or other experience.

_____

_____

_____

_____

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_____

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I have read the position opening announcement and I can perform the essential functions of the position for which I am applying, with or without reasonable accommodation. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

The applicant understands that neither this document nor any offer of employment from the employer constitute an employment contract unless a specific document to that affect is executed by the employer and employee in writing.

In the event of employment, I understand that false or misleading information or omissions given in my application or interview(s) may result in immediate discharge. I understand, also, that I am required to abide by all rules and regulations of the employer.

_____ _____

Signature of Applicant **Date**

Return Completed Application to:
Union Gap City Hall
102 W. Ahtanum Road
P. O. Box 3008
Union Gap, WA 98903-0008