

# Town of Yacolt Employment Application

202 W. Cushman, Yacolt, WA. 98675 Phone (360) 686.3922 Fax (360) 686.3853 www.townofyacolt.com An Equal Opportunity Employer

### Important Information about the Application Process

- This Employment Application form is to be used for all internal, external, and seasonal or temporary job postings. It is not to be used for police officer positions. We strongly encourage you to provide a resume and cover letter in addition to this application form.
- Carefully read the job announcement for the position you are applying for. Applicant materials and communications will be considered as determined
  appropriate by the Town during our screening and selection process. Therefore, it is important that all materials be accurate, neat and complete.
  Once received, all application materials become the property of the Town of Yacolt.
- Employment with the Town may require transfer to different shifts or work locations. In the case of some positions, this may include overtime or evening, weekend or holiday hours. In accepting employment with the Town, you are affirming your ability to accept such transfers and hours.
- In accordance with Federal law proof of identity and proof of authorization to work in the United States is required upon employment. This may also include individuals who have the right to work under an employment visa or similar document.
- If you require special arrangements to participate in the application or selection process, due to a disability, please contact Human Resources.
- We accept applications only for positions which are currently posted.
- Unless otherwise stated in the job announcement, only complete Town of Yacolt Employment Applications will be considered in the selection process. All
  materials submitted along with your application become property of the Town of Yacolt and will be used in our selection process. By signing this application
  you are affirming that all information you provide is accurate and complete.
- If there are supplemental questions on the announcement, answers must be submitted with the employment application before the closing deadline in order to be considered for the position. Incomplete or late application materials will not be considered.
- Applications are considered active for 90 calendar days. Please keep a copy for your files.

### **Applicant Information**

A separate application must be submitted for each position you are applying for. Please submit only one (1) copy per recruitment.

Position Title Applying For:		
First Name:	Last Name:	
Address:		
City:	State:	Zip Code:
Email Address:		
Home Phone: ( ) - Day Time	Phone: ( ) -	Extension:

### **Employment History**

- Be sure to describe in this section the duties you have performed which demonstrate that you have the knowledge and skills to perform the duties of the job for which you are applying. You may include on-the-job training, internship, volunteer activity, self-employment, and military experience.
- If a supplemental questionnaire, resume, certification or other information is required, it should accompany this application.

- Begin with your most recent job or assignment first and list each job separately, extending for a period of 10 years.
- Additional pages of work history may be attached if necessary.
- A resume, while strongly encouraged, is not a substitute for this application unless otherwise noted in the job announcement.

Current or Most Recent Job Title:		Start Date:	End Date:	
Employer:		Phone: ( ) -		
Employer Address:				
If this is your current employer may we contact them if you become	ome a finalist for the	his position? Yes No No		
Supervisor:	Number of peop	ple you supervised in this position:		
Starting Salary:	Ending Salary:			
Reason for Leaving:				
Duties and Responsibilities:				
Job Title:		Start Date:	End Date:	
Employer:		Phone: ( ) -	Life Bato.	
Employer Address:		1 110110. ( )		
May we contact this employer? Yes \( \square\) No \( \square\)				
Supervisor:	Number of peop	ole you supervised in this position:		
Starting Salary:	Ending Salary:	no you cupor ricou in the position.		
Reason for Leaving:	Litaning Galary.			
Duties and Responsibilities:				
Job Title:		Start Date:	End Date:	
Employer:		Phone: ( ) -		
Employer Address:				
May we contact this employer? Yes  No				
Supervisor: Number of people		ole you supervised in this position:		
tarting Salary: Ending Salary:				
Reason for Leaving:				
Duties and Responsibilities:				
Job Title:		Start Date:	End Date:	
		Phone: ( ) -	Liiu Dale.	
Employer: Employer Address:		FIIONE.( ) -		
Employer Address.				
May we contact this employer? Yes \( \square\) No \( \square\)				

Supervisor:		Number of	Number of people you supervised in this position:					
Starting Salary:		Ending Sal	Ending Salary:					
Reason for Leaving:			l					
Duties and Responsibilities:								
Education, Training,	Certificates	& Lice	enses					
Do you have a high school diplo	oma, GED or eq	uivalent?	Yes No					
Colleges, universities, militar	ry, trade, busine	ss or othe						
Name of School	Location of Sch	ınnl	Courses of Stud (Major)	ly	Credits Completed Semester Quarter hours			Specify Degree or Certificate Earned
Traine of concer	20041011 01 001		(IVIAJUI)		hours			Gertinoate Earried
Note: A valid driver's license is required for positions where vehicle or equipment operation is an essential job function.								
List driver's license or other	certificates requ	uired for th	nis position					
Title of License or Certificate		Number		Issuing A	gency		Date Issue	d/Date of Expiration
								<u>                                     </u>
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								1
De very effer any hi line val communications abillo valido many ha habiful to very a effermance of this into Man								
Do you offer any bi-lingual communications skills which may be helpful to your performance of this job? Yes Language(s): No								
Personal References		-						
Please provide three (3) non-related references wh			nom we may contact. Address & Phone Number			Relationship and Years Acquainted		
Name		Audie	ii Coo a i Hohe Hailibei		Troidionomp and Todio Aoquainted			
		1						

ene	ral information	
•	Are you now, or have you ever been employed at the Town of Yacolt? Yes No If yes, please select the appropriate employment status: Regular Temporary/Seasonal Volunteer Youth	I ☐ College Intern
	Please give job title, department, and dates worked:	
•	Do you have relatives employed by the Town? Yes No No If yes, please give name, relationship, and department:  Note: There are some limitations on the employment of former employees and on the employment separately.	ent of relatives. Each case is considered
•	Are you at least 18 years old? Yes No Note: Due to occupational safety guidelines, some positions may have a minimum age requirent if applicable.	nent, which is noted on the job announceme
•	What are your salary expectations? (please refer to job announcement for approved range)	_
•	Are you able to safely perform the essential job functions of this position, as noted on the job ann accommodation? Yes \sum No \sum	nouncement, with or without reasonable
•	Have you been convicted of a crime or served time in prison during the last 10 years? Yes \( \subseteq \text{N} \) If yes, attach additional page with explanation of conviction(s) to this application. Please include to disposition. Note: A conviction is not an automatic bar to employment. Each case is considered duties of the position.	the date, exact charge, jurisdiction and
ertif	ication of Information, Authorization & Release	
Y MY 5 •	SIGNATURE BELOW, I:  Understand that as required by the Health Insurance Portability and Accountability Act of 1996, the information, except as provided in the Town's Notice of Privacy Practices, without my authorization am giving permission for the uses and disclosures of protected health information as described in this authorization at any time by contacting the Town's Human Resources Office;	on. My signature on this form indicates that
•	Certify that all information I provide as part of this application process is true and complete to the that any misstatement of fact may result in my disqualification from consideration for Town employment;	
•	Authorize the Town of Yacolt to contact my prior employers, educational institutions, references, have been associated to give the Town of Yacolt any pertinent information about my employability	
•	Release the individual, company, institution or organization and all individuals connected therewigiving such information; and further release the Town of Yacolt from all liability whatsoever incurr	
•	Release the Town of Yacolt, its employees, and agents from all liability and/or claims whatsoever information.	r related to obtaining and/or using such
*0	ignature of Applicant	Data
3	ignature of Applicant	Date

\*Special Note: Original signature is required.

### **EQUAL EMPLOYMENT OPPORTUNITY**

The Town of Yacolt is an equal opportunity employer. To assist in our record keeping, reporting, and other legal requirements, please complete the following survey. (Note: Providing this information is voluntary and will not be included in the application packet forwarded to the hiring authority).

Race				
	Black (Not of Hispanic origin) - All persons having origins in any of the Black racial groups of Africa.			
	Hispanic, of Cuban, Mexican, Puerto Rican, Central or South American or other Spanish culture or origin regardless of race.			
	White (Not of Hispanic origin) - All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.			
	American Indian or Alaskan Native - All persons having origins in any of the original peoples of North America and who maintain cultural identification through tribal affiliation or community recognition.			
	Asian or Pacific Islander - All persons having origins in any of the original peoples of the Far East, Southeast Asia, Indian Subcontinent or the Pacific Islands.			
Gen	der  Male Female			
Age	Under age 40 Over age 40			
Disa	bility Are you an individual with a disability? ☐Yes ☐No			
	mployment: The Town of Yacolt is an Equal Opportunity Employer. All qualified employees will be considered for employment			

**Equal Employment:** The Town of Yacolt is an Equal Opportunity Employer. All qualified employees will be considered for employment without regard to race, religion, color, national origin, sex, age, marital status, sexual orientation, ancestry, sensory, mental or physical disability or veteran status; or any non-job related factor. Any person requiring special accommodations should advise the Town of their needs by the application closing date.

#### BACKGROUND CHECK DISCLOSURE AND AUTHORIZATION FORM

This form, which you should read carefully, has been provided to you because the Town of Yacolt may request a background report on you. The Town of Yacolt will use any such report(s) solely for employment purposes, including those associated with employees, volunteers, and others performing work for the Town of Yacolt. Information that may be obtained includes social security number verification, criminal records, public court records, educational records, verification of volunteer and/or employment positions held and verification of licensing and certifications. The information contained in these reports may be obtained from private and/or public record sources including sources identified by you in your job application.

With this Disclosure and Authorization form you are also being provided a copy of a "Summary of Your Rights Under the Fair Credit Reporting Act" as issued by the Federal Trade Commission.

#### AUTHORIZATION

By signing your name below, you:

- Indicate you have carefully read and understand this Disclosure and Authorization form
- Consent to the release of consumer reports to the Town of Yacolt in conjunction with your job application
- Understand that if the Town of Yacolt hires you, your consent will apply throughout your employment unless you revoke or cancel your consent in writing by sending a signed letter or statement to the company
- Authorize the disclosure to Town of Yacolt of information concerning employment history, education, and criminal history.

This Disclosure and Authorization form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Town of Yacolt.

SIGNATURE:	DATE:
PRINTED NAME: _	

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your file disclosure). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if: a person has taken adverse action against you because of information in your credit report;

- > you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your creditworthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to <a href="https://www.ftc.gov/credit">www.ftc.gov/credit</a>.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active-duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.