



# City of Hoquiam EMPLOYMENT APPLICATION

Administration Department  
609 8<sup>th</sup> Street  
Hoquiam, WA 98550

The City of Hoquiam is an equal Opportunity Employer

The City of Hoquiam provides reasonable accommodation to its employees & the public with disabilities, including disabled veterans.

An incomplete application may delay or disqualify you. Do not use pencil to complete this application.

## Personal

Position Applied For \_\_\_\_\_ Department \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_

Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Day time Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Are you under 18 years old? ( ) Yes ( ) No

Notice: If you are currently under PERS, LEOFF, or TRS, your retirement benefits may be interrupted if you are hired by the City of Hoquiam. Contact State Department of Retirement Systems with questions.

## Education

High School Diploma or GED received? ( ) Yes ( ) No If no degree, please specify semester or credit hours

College/University/Voc Tech School \_\_\_\_\_ City/State \_\_\_\_\_ Major \_\_\_\_\_ Degree/Cert \_\_\_\_\_ Credit Hours \_\_\_\_\_

College/University/Voc Tech School \_\_\_\_\_ City/State \_\_\_\_\_ Major \_\_\_\_\_ Degree/Cert \_\_\_\_\_ Credit Hours \_\_\_\_\_

College/University/Voc Tech School \_\_\_\_\_ City/State \_\_\_\_\_ Major \_\_\_\_\_ Degree/Cert \_\_\_\_\_ Credit Hours \_\_\_\_\_

## Skills

Describe your skills, knowledge & abilities that qualify you for this position.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List licenses, professional affiliations, and non-religious volunteer experiences that pertain to this position.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Employment History

(Please Read Carefully)

Resumes may be attached but will not be accepted as a substitute for completing this section. Beginning with your present or most recent employment, list your work experience for at least the last ten years, including periods of self-employment & US Military service. Attach separate sheets if necessary.

<b>From (month/yr)</b>	<b>Company Name</b>			<b>Your Position (Title)</b>	
<b>To (month/yr)</b>	<b>City</b>	<b>State/Zip</b>	<b>Type of Company</b>		<b>Telephone</b>
<b>Salary</b>	<b>Full/Part Time</b>	<b>Supervisor's Name/Title</b>			<b>May We Contact</b> ( ) Yes ( ) No
<b>Duties:</b>					
<b>From (month/yr)</b>	<b>Company Name</b>			<b>Your Position (Title)</b>	
<b>To (month/yr)</b>	<b>City</b>	<b>State/Zip</b>	<b>Type of Company</b>		<b>Telephone</b>
<b>Salary</b>	<b>Full/Part Time</b>	<b>Supervisor's Name/Title</b>			<b>May We Contact</b> ( ) Yes ( ) No
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<b>From (month/yr)</b>	<b>Company Name</b>			<b>Your Position (Title)</b>	
<b>To (month/yr)</b>	<b>City</b>	<b>State/Zip</b>	<b>Type of Company</b>		<b>Telephone</b>
<b>Salary</b>	<b>Full/Part Time</b>	<b>Supervisor's Name/Title</b>			<b>May We Contact</b> ( ) Yes ( ) No
<b>Duties:</b>					
<b>From (month/yr)</b>	<b>Company Name</b>			<b>Your Position (Title)</b>	
<b>To (month/yr)</b>	<b>City</b>	<b>State/Zip</b>	<b>Type of Company</b>		<b>Telephone</b>
<b>Salary</b>	<b>Full/Part Time</b>	<b>Supervisor's Name/Title</b>			<b>May We Contact</b> ( ) Yes ( ) No
<b>Duties:</b>					

Have you been convicted of a felony or released from prison within the last 7 years?

Yes             No

If the answer is "yes", please give the nature of the crime, dates of conviction, & the court in which you were convicted.

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Do you have any relatives employed by the City of Hoquiam?    Yes    No

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Name & Relationship of Relative (s) at the City of Hoquiam

Having a relative employed by the City of Hoquiam will not necessarily bar you from employment.

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This statement must not be altered. I understand that false or misleading information in any of my answers or statements will result in my application being eliminated from further consideration, or if employed, will be cause for my dismissal. All statements submitted on this application for employment will be subject to investigation and verification prior to appointment.

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Signature of Applicant

Date

This page is optional. It will be used only for record keeping purposes.

## RECRUITMENT INFORMATION

How did you learn about the job?

Position you are applying for? \_\_\_\_\_

Saw advertisement in paper (which one) \_\_\_\_\_

Magazine or Journal (which one) \_\_\_\_\_

Saw job posting (where) \_\_\_\_\_

Career Fair (which one) \_\_\_\_\_

Heard about it from current city employee (whom) \_\_\_\_\_

## E.E.O. Information

The data collected below will not be used to make employment decisions. It will be used for affirmative action record keeping purposes only.

Date of birth: \_\_\_\_\_ ( ) Male ( ) Female

( ) African American ( ) Hispanic ( ) Native American (proof of tribal affiliation is required)

( ) Asian ( ) Pacific Islander ( ) Caucasian (White, not of Hispanic Origin)