

City of Leavenworth
P.O. Box 287
Leavenworth, WA 98826
509-548-5275(Phone)
509-548-6429 (Fax)
www.cityofleavenworth.com



Application for Employment

Notice: The City of Leavenworth is an Equal Opportunity Employer. Please notify our front office staff if you need any accommodation or assistance with any part of our application process.

Specific Position Applied for: _____ Today's Date: _____

APPLICANTS: IN ORDER TO BE CONSIDERED FOR EMPLOYMENT, THIS APPLICATION MUST BE COMPLETED ENTIRELY. PLEASE REMEMBER TO PRINT CLEARLY, AND TO READ AND SIGN ON THE LAST PAGE.

Name: _____ Home Phone: _____
(Last) (First) (MI)

Address: _____ City: _____ State: _____ Zip: _____

Daytime or Message Phone: _____

Why are you interested in this particular job? _____

What skills and training qualify you for this position? _____

What portions of your work experience qualify you for this job? _____

EDUCATION

Circle highest grade completed in school: 1 2 3 4 5 6 7 8 9 10 11 12 College 1 2 3 4 Graduate 1 2 3 4

	Name of School	Location	Diploma or Degree	Major
High School	_____	_____	_____	_____
College or University	_____	_____	_____	_____
Graduate School	_____	_____	_____	_____
Vocational or Training	_____	_____	_____	_____

ADDITIONAL INFORMATION

Professional Memberships and Affiliations:

Professional and Trade Licenses:

Talents, Skills, or Hobbies:

Have you ever been employed by the City of Leavenworth before? When? In what Capacity? _____

Have you ever been convicted of a felony? ____ Yes ____ No If yes, please explain _____

Do you claim Veteran's preference? ____ Yes ____ No

Can you perform the essential functions of the position with or without accommodations? ____ Yes ____ No

(please review the applicable job description.)

EMPLOYMENT HISTORY

This section must be completed entirely. Do not substitute a resume. List all work experience, paid or unpaid, beginning with your current or most recent job. Include military experience as well as volunteer jobs that you wish to have considered as part of your qualifications for the position that you are seeking.

Describe each job separately, emphasizing your specific tasks and any supervisory, technical or other responsibilities. Explain all breaks in continuous employment. If more space is needed, additional pages can be added.

PRESENT OR LAST POSITION

_____	_____	Beginning Salary _____	Final Salary _____
Employer	From (month) (year)		
_____	_____	Full-time ____	Part-time ____
Address	To (month) (year)		
_____	_____	Supervisor's name	Phone number
Your Title	_____	May we contact this employer? _____	

Duties/Responsibilities (be specific)

Reason for leaving or considering a change

Employer

Address

Your Title

From (month) (year)

To (month) (year)

Supervisor's name

Phone number

Beginning Salary _____ Final Salary _____

Full-time ____ Part-time ____

May we contact this employer? _____

Duties/Responsibilities (be specific)

Reason for leaving or considering a change

Employer

Address

Your Title

From (month) (year)

To (month) (year)

Supervisor's name

Phone number

Beginning Salary _____ Final Salary _____

Full-time ____ Part-time ____

May we contact this employer? _____

Duties/Responsibilities (be specific)

Reason for leaving or considering a change

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION:

The City of Leavenworth is an equal opportunity employer and does not discriminate on the basis of gender, age, race and color, religion, genetics, marital status, national origin, disability or veteran status. (_____initial here)

Interviews are given on a competitive basis, using job-related factors, after a written application has been received and reviewed. Because of the large number of applications received, not everyone who applies for a vacant position will be interviewed. (_____initial here)

I understand that, if selected, I will be required to provide proof of my identity and my legal right to work in the United States prior to actual employment with the City of Leavenworth. (_____initial here.)

I consent to drug testing as may be requested by the City of Leavenworth's representatives. (_____initial here.)

I certify that I have answered truthfully and have not knowingly withheld any information relative to my application. I understand that a misrepresentation or material omission on this application will result in my being eliminated from further consideration. I further understand that, if accepted for employment, any misrepresentation or material omission which becomes known to the City of Leavenworth, will result in immediate termination of my employment. (_____initial here.)

I authorize all previous employers and supervisors, including all persons with and for whom I have worked, to give the City of Leavenworth any and all information regarding me and my previous employment. I release the City of Leavenworth, and all previous employers and supervisors from liability for any damages that may result from furnishing information to the City of Leavenworth. (_____initial here.)

In consideration of my employment, I agree to conform to the instructions, rules and policies of the City of Leavenworth. (_____initial here.)

Signed

Dated