



TOWN OF NACHES

Application for Employment Town of Naches

29 EAST SECOND STREET
PHONE (509) 653-2647

PO BOX 95

NACHES, WA 98937
FAX (509) 653-2732

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, qualified individual with disability status, or any other protected status. All applicants are required to complete an application for employment.

THE POSITION APPLIED FOR: _____

NAME: _____
(First) (Middle) (Last)

ADDRESS: _____
(Street) (City) (State) (Zip)

TELEPHONE: Home: () _____ Work: () _____ Are you 18 years or older? () Yes () No

ARE YOU A CURRENT OR FORMER EMPLOYEE OF THE TOWN OF NACHES? () Yes () No
IF YES, LIST THE POSITION/DEPARTMENT: _____

DO YOU HAVE RELATIVES EMPLOYED OR INVOLVED BY THE TOWN OF NACHES? () Yes () No
IF YES, LIST THE POSITION/RELATIONSHIP: _____

IS THERE ANY CONDITION THAT WILL INTERFERE WITH PERFORMING THE ESSENTIAL DUTIES OF THE JOB APPLIED FOR WITH OR WITHOUT ACCOMMODATION? () Yes () No IF YES, PLEASE EXPLAIN:

TYPE OF WORK DESIRED: () FULL-TIME () PART-TIME () TEMPORARY () SUMMER () JOB SHARE
() OTHER

(SPECIFY)

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.

CAN YOU TRAVEL IF THE JOB REQUIRES IT? () Yes () No

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST TEN YEARS? () Yes () No
IF YES, PLEASE LIST:
(A) THE CRIME(S): _____
(B) THE DATE(S) OF CONVICTION: _____
(C) THE COURTS(S) IN WHICH YOU WERE CONVICTED: _____

HAVE YOU BEEN CONVICTED OF A CRIME 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 COURTS(S) IN WHICH YOU WERE CONVICTED: _____

IF YOU ARE APPLYING FOR A POSITION INVOLVING THE OPERATION OF A TOWN 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 SEVEN YEARS.

(B) DO YOU CURRENTLY HAVE A VALID DRIVER'S LICENSE? () Yes () No
IF YES, WASHINGTON STATE () OTHER ()

(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.

EDUCATION:

TYPE OF SCHOOL	SCHOOL & LOCATION	DATES OF ENROLLMENT	MAJOR COURSE	DIPLOMA OR DEGREE
High School or G.E.D.				
Business or Technical				
College				
College				
College				
Other Courses/Training				

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: _____

GIVE THE NUMBER OF YEARS EXPERIENCE, TRAINING AND/OR SPEED IN EACH OF THE FOLLOWING (if appropriate for the job applied for):

10 Key _____ Data Entry _____ Computer _____ Typing Speed _____ Bookkeeping _____

Spreadsheet Software (please specify) _____

Word Processing Software (please specify) _____

WORK HISTORY: Beginning with your present or most recent employment, list your work experience history. Be sure to include any non-paid experience which is related to the job for which you are applying.

EMPLOYER'S NAME: _____ FROM: _____ TO: _____

ADDRESS: _____ SUPERVISOR: _____

PHONE: (____) _____ NUMBER OF HOURS WORKED PER WEEK: _____ STARTING SALARY: _____

POSITION: _____ LAST SALARY: _____

NUMBER OF EMPLOYEES SUPERVISED BY YOU: _____ MAY WE CONTACT THIS EMPLOYER: _____

PRIMARY DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER'S NAME: _____ FROM: _____ TO: _____

ADDRESS: _____ SUPERVISOR: _____

PHONE: (____) _____ HOURS WORKED PER WEEK: _____ STARTING SALARY: _____

POSITION: _____ LAST SALARY: _____

NUMBER OF EMPLOYEES SUPERVISED BY YOU: _____ MAY WE CONTACT THIS EMPLOYER: _____

PRIMARY DUTIES: _____

REASON FOR LEAVING: _____

EMPLOYER'S NAME: _____ FROM: _____ TO: _____

ADDRESS: _____ SUPERVISOR: _____

PHONE: (____) _____ HOURS WORKED PER WEEK: _____ STARTING SALARY: _____

POSITION: _____ LAST SALARY: _____

NUMBER OF EMPLOYEES SUPERVISED BY YOU: _____ MAY WE CONTACT THIS EMPLOYER: _____

PRIMARY DUTIES: _____

REASON FOR LEAVING: _____

REFERENCES:

GIVE NAME, ADDRESS, AND TELEPHONE NUMBER OF THREE REFERENCES WHO ARE NOT RELATED TO YOU AND ARE NOT PREVIOUS EMPLOYERS.

1. _____
2. _____
3. _____

The Town of Naches is mindful of its obligation to employ qualified persons and its entitlement under law to consider an applicant's CONVICTION RECORD AS IT RELATES TO THE JOB. A CONVICTION RECORD WILL NOT DISQUALIFY YOU FOR EMPLOYMENT UNLESS SUCH RECORD WOULD REASONABLY AFFECT YOUR FITNESS FOR THE JOB FOR WHICH YOU HAVE APPLIED.

ALL ANSWERS AND STATEMENTS ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT UNTRUTHFUL OR MISLEADING ANSWERS ARE CAUSE FOR REJECTION OF MY APPLICATION, OR DISMISSAL IF EMPLOYED.

SIGNED: _____ DATE: _____

FOR PERSONNEL DEPARTMENT USE ONLY

Arrange Interview Yes No

Remarks _____

Interviewer(s) _____ Date _____

Employed Yes No Date of Employment _____

Job Title/Department _____ Hourly Rate/Salary _____

Position(s) Applied For Is Open: Yes No

Position(s) Considered For: _____

NOTES
