



TOWN OF SOUTH PRAIRIE

121 NW Washington Street

PO Box 870

South Prairie, WA 98385

Application for Employment

APPLICANT INFORMATION

EQUAL OPPORTUNITY:

THE TOWN OF SOUTH PRAIRIE, WASHINGTON IS AN EQUAL OPPORTUNITY EMPLOYER. WE HIRE, TRAIN AND PROMOTE WITHOUT DISCRIMINATION DUE TO RACE, COLOR, RELIGION, GENDER, NATIONAL ORIGIN, ANCESTRY, MARITAL STATUS, AGE, SEXUAL ORIENTATION, HANDICAP, QUALIFIED VETERANS AND DISABLED VETERANS. HIRING, PROMOTIONS, LAY-OFFS, RATES OF PAY, TRAINING AND OTHER EMPLOYMENT ACTIVITIES WILL BE CONSISTENT WITH THIS EQUAL OPPORTUNITY STATEMENT.

INSTRUCTIONS:

PRINT OR TYPE ALL INFORMATION. THE APPLICATION MUST BE FILLED OUT ACCURATELY AND COMPLETELY. ANSWER ALL QUESTIONS. DO NOT LEAVE AN ITEM BLANK. IF AN ITEM DOES NOT APPLY, WRITE N/A (NOT APPLICABLE). IF YOU NEED ADDITIONAL SPACE TO ANSWER A QUESTION FULLY, YOU MAY USE FULL SHEETS OF PAPER THAT ARE THE SAME SIZE AS THIS PAGE. ON EACH ADDITIONAL PAGE, INCLUDE YOUR NAME, THE POSITION YOU ARE APPLYING FOR, AND THE SPECIFIC SECTION. A RESUME MUST BE INCLUDED WITH YOUR APPLICATION PACKAGE. YOU MAY ALSO SUBMIT COPIES OF DOCUMENTS AND CERTIFICATES, WHICH SUPPORT YOUR APPLICATION. ALL MATERIALS SUBMITTED BECOME THE PROPERTY OF THE TOWN OF SOUTH PRAIRIE AND WILL NOT BE RETURNED. NOTHING CAN BE ADDED TO YOUR APPLICATION AFTER THE ANNOUNCEMENT PERIOD HAS CLOSED. ALL STATEMENTS MADE ON THE APPLICATION ARE SUBJECT TO VERIFICATION. FAILURE TO FOLLOW THESE INSTRUCTIONS MAY BE CAUSE FOR REJECTION OF THE APPLICATION. ILLEGIBLE OR INCOMPLETE APPLICATIONS MAY BE REJECTED. EXAGGERATED, FALSE, OR MISLEADING STATEMENT MAY BE CAUSE FOR REJECTION OF THE APPLICATION AND/OR TERMINATION OF EMPLOYMENT. MY INITIALS AT THE END OF THIS SENTENCE AFFIRM THAT I HAVE READ AND UNDERSTAND THESE INSTRUCTIONS.

Last Name		First Name		M.I.	Date
Street Address				Apartment/Unit #	
Mailing Address					
City		State		ZIP	
Phone		E-mail Address			
Date Available		Social Security No.		Desired Salary	
Position Applied for					
Are you a citizen of the United States?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?	
		YES <input type="checkbox"/>	NO <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
Have you ever worked for this company?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If so, when?	
Have you ever been convicted of a felony?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, explain	
EDUCATION					
High School			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
College			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree
Other			Address		
From	To	Did you graduate?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Degree

Office: (360) 897.8878 Fax: (360) 897.8717

E-Mail: south_prairie@yahoo.com Website: www.townofsouthprairie.com



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REFERENCES

Please list three professional references.

Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

PREVIOUS EMPLOYMENT

Company	Phone ()	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company	Phone ()	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		
From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
Company	Phone ()	
Address	Supervisor	
Job Title	Starting Salary \$	Ending Salary \$
Responsibilities		



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From	To	Reason for Leaving
May we contact your previous supervisor for a reference? YES <input type="checkbox"/> NO <input type="checkbox"/>		
MILITARY SERVICE		
Branch	From	To
Rank at Discharge	Type of Discharge	
If other than honorable, explain		
DISCLAIMER AND SIGNATURE		
<u>AUTHORIZATION TO RELEASE INFORMATION</u>		
<u>CONDITIONS OF EMPLOYMENT</u>		
I have made application for employment with the Town of South Prairie. I authorize any persons or organizations to give you any and all information concerning my previous employment, education, or any other information they might have.		
Furthermore, if I am employed by the Town of South Prairie, I agree to the policies, rules, orders and regulations of the government set forth in the Town of South Prairie's personnel system, policies and procedures and ordinances; and acknowledge that these policies and procedures, rules, and regulations may be changed, interpreted, withdrawn, or added to by the Town of South Prairie at any time, at the Town's sole discretion.		
I consent to undergo a drug test and I understand the offer of employment by the Town of South Prairie requires the successful passing of such drug test. THIS POSITION MAY REQUIRE RANDOM DRUG TESTING. YOU WILL ALSO BE TESTED FOR DRUGS AND/OR ALCOHOL IN THE EVENT OF AN ACCIDENT OR INCIDENT.		
THIS APPLICATION WILL REMAIN ACTIVE FOR NINETY (90) DAYS.		
Are you presently employed? YES _____ NO _____ May we contact your present employer? YES _____ NO _____		
You must sign the "Authorization to Release Information" form to enable us to contact prior employers, even though we may not contact your present employer.		
<u>AUTHORIZATION TO RELEASE OF INFORMATION</u>		
_____ SIGNATURE		_____ PRINT NAME
_____ DATE		
I certify that my answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.		
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.		
Signature		Date



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SUPPLEMENTAL QUESTIONNAIRE

Public Works
Utilities Operator

1. Describe your knowledge and experience dealing with local, state and/or federal regulatory agencies.
2. Describe your experience working independently and in a group meeting.
3. Describe an experience where you were faced with a personnel issue (peer or subordinate). What was your role?
4. Describe your experience working with computers (include programs you are proficient with).
5. Describe your experience operating light equipment.
6. Describe your knowledge of and experience with environmental monitoring and pollution abatement.