



CITY OF HOQUIAM
EMPLOYMENT APPLICATION

Administration Department
609 8th Street
Hoquiam, WA 98550

The City of Hoquiam is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, sex, age, color, sexual orientation, religion, national origin, marital status, genetic information, veteran's status, disability, or any other basis prohibited by federal, state or local law.

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

An incomplete application may delay or disqualify you. Do not use pencil to complete this application. DO NOT submit a photograph of yourself.

PERSONAL

Position Applied for

Department

Name: Last

First

Middle Initial

Street Address

Home Telephone Number

City

State

Zip Code

Day Time Telephone Number

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

Are you a U.S. Citizen, or, do you have a Visa permitting you to work in the U.S.?
(Documentation of authorization to work in the U.S. will be required if an offer of employment is made and accepted). () Yes () No.

Do you have, or can you obtain, a valid Washington State Driver's License? () Yes () No

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	Credits
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SKILLS

Describe your skills, special knowledge and abilities that qualify you for this position (attach separate page, if necessary)

List any 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 (10) years, including periods of self-employment and/or military service. Attach separate sheets if necessary.

From (month/year)	Company Name	Your position (job title)		
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To (month/year)	City	State/Zip	Type of Company	Telephone Number
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Salary	Full/Part time	Supervisor's Name/Title	May we Contact?
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Duties:

From (month/year)	Company Name	Your position(job title)		
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To (month/year) City State/Zip Type of Company Telephone Number

Salary Full/Part time Supervisor's Name/Title May we Contact?

Duties:

From (month/year) Company Name Your position (job title)

To (month/year) City State/Zip Type of Company Telephone Number

Salary Full/Part time Supervisor's Name/Title May we Contact?

Duties:

From (month/year) Company Name Your position(job title)

To (month/year) City State/Zip Type of Company Telephone Number

Salary Full/Part time Supervisor's Name/Title May we Contact?

Duties:

From (month/year) Company Name Your position (job title)

To (month/year) City State/Zip Type of Company Telephone Number

Salary Full/Part time Supervisor's Name/Title May we Contact?

Duties:

The City of Hoquiam is mindful of its obligation to employ qualified persons and its entitlement under law to consider an applicant's criminal convictions record as it relates to job performance. 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. Have you been convicted of a felony or released from prison within the last ten (10) years, or have you been convicted of a misdemeanor or gross misdemeanor within the past three (3) years? () Yes () No.

If so, please list the nature of the crime(s), date(s) of conviction, and the court(s) in which you were convicted, and explain circumstances:

Do you have any relatives employed by the City of Hoquiam? () Yes () No
(Having a relative employed by the City of Hoquiam will not necessarily bar you from
employment)

Name and Relationship of relative employed by the City of Hoquiam

(This statement shall not be altered) The information provided above is true to the best of my
knowledge. I understand that false or misleading information in any of my answers or statements
above will result in my application being eliminated from further consideration, or if employed, will
be cause for my dismissal. I understand that all statements submitted in this application for
employment will be subject to investigation and verification prior my appointment. I have read the
job position opening announcement and state that I can perform the essential functions of the
position for which I am applying, with or without reasonable accommodation.

Signature of Applicant

Date