# **City of Cashmere Application for Employment**





City of Cashmere 101 Woodring St. Cashmere, WA 98815 (509) 782-3513 mail@cityofcashmere.org

You must submit a separate Application for each position.

DO NOT submit a photograph of yourself.

The City of Cashmere is an Equal Opportunity Employer and does not unlawfully discriminate on the basis of race, and color, sex, age, color, religion and creed, national origin, marital status, disability, HIV, AIDS and Hepatitis C status, honorably discharged veteran or military status, pregnancy and maternity, sexual orientation or gender

identity use of a guide dog or other service animal, genetic information or any other basis prohibited by federal, state or local law. Complete all information from this point forward. An incomplete Application may disqualify you from further consideration

Complete an information from this point forwa	ru. An incomplete Application may	disquality you from further	Consideration.
<b>Applicant:</b> Write the Position Title of the Job	you are applying for here		
Name (Last)		(First)	(Middle)
Address			
	City	State Zip	
Home Phone ( ) Cell (	) Work ( )	Email	
Are you authorized to work in the United States for City of Cashmere? (Note: if hired, a form I-9, Employment Eligibility Verification must be complated the start of employment)	□ Vos □ No	Are you over the age of 18?	Yes No
Do you have a valid Washington State Commercial	Driver's License?	☐ Yes ☐ No	
Do you wish to claim Veteran's Preference for testi	ng, pursuant to RCW 41.04.010?	☐ Yes ☐ No	
TRAINING AND EDUCATION			
Highest Grade Completed: 8 9 10	□ 11 □ 12 □ GED		
Colleges/Other Training	Subject/Major	Degree/Certificate	Date Completed
EQUIPMENT, OFFICE AND COMPUTER SKIL	LS		
Describe computer and other equipment operation skill are applying.		other information relevant to the	e position for which you
CONTINUE CONTINUES			
The City of Cashmere is mindful of its obligation to er as it relates to job performance. A conviction record affect your fitness for the job for which you have a last 10 years.	will not automatically disqualify you fro	om employment unless such rec	ord would reasonably
If Yes, Please Explain			
PROFESSIONAL REFERENCES (Do Not List Re	llatives)		
Name/Title	Employer	Phone (	)
Name/Title	Employer	Phone (	_)
Name/Title	Employer	Phone (	)
SIGNATURE IS REQUIRED			
	and complete. I have read the Position Job Descr	ription and I can perform the essentia ditional offer of employment for a p	I functions of the position

WORK HISTORY					
Beginning with your present or most recent employment, list your work/experience history for the last 10 years or experience prior to that time which is directly related to the position for which you are applying. Attach additional sheets as necessary. Be sure to include any non-paid experience which is related to the job for which you are applying. Complete the following sections even if you are submitting a resume in addition to this application. An incomplete application may disqualify you. If you have been known by a different name by any of these employers, please identify the employer and state the name here:					
Ell- N			Mo/Year	T-	Mo/Year
Employer's Name		From		To	
Address		Supervisor Hours Worked I	) Wl-		
Phone		Hours Worked I	er week		
Position					
Number Of Employee	s Supervised By You				
Reason For Leaving					
Primary Duties					
			Mo/Year		Mo/Year
Employer's Name		From		To	
Address		Supervisor			
Phone		Hours Worked I	Per Week		
Position					
Number Of Employees	s Supervised By You				
Reason For Leaving					
<b>Primary Duties</b>					
			Mo/Year		Mo/Year
Employer's Name		From	Into, Itali	To	ATO/ Telli
Address		Supervisor			
Phone		Hours Worked I	Per Week		
Position					
Number Of Employees	s Supervised By You				
Reason For Leaving					
<b>Primary Duties</b>					
Employer's Name		From	Mo/Year	To	Mo/Year
Address		Supervisor			
Phone		Hours Worked I	Per Week		
Position					
Number Of Employee	s Supervised By You				
Reason For Leaving					
Primary Duties					



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### AUTHORIZATION TO RELEASE EMPLOYMENT RECORDS

#### References will only be checked for finalists.

Current and/or prior employers will only be contacted after an applicant has been notified that they are a finalist.

I, the undersigned applicant for employment with the City of Cashmere, in consideration of the review of my employment application, do authorize the City of Cashmere to solicit information regarding my character, general reputation, previous employment, and similar background information, and to contact any and all references I have given on my application. I hereby release all parties and persons connected with any such request for information, from all claims, liabilities, and damages for any reason arising out of the furnishing of such information. If employed, I release the City of Cashmere from any liability for future references it may provide regarding my work history at the City of Cashmere.

It is my intention that any copy of this authorization be as effective as the original.

Date	
Name (Please Print)	
Signature	

I certify that the information given by me to the City of Cashmere is true and complete to the best of my knowledge. I understand that falsification of this application will be grounds for elimination from further consideration or, if employed, may result in immediate dismissal.

I further certify that I am not engaged in any outside activity or business that could be considered in conflict with City of Cashmere interest or those of its clients, nor will I become engaged in such activity or business if employed.

If employed, I further agree that if I lose, damage, or fail to return any of the City of Cashmere's property, the City of Cashmere is authorized to deduct from my wages sufficient funds to replace its property.

Date	
Name (Please Print)	
Signature	

# THIS PAGE WILL BE REMOVED FROM THE APPLICATION AND KEPT SEPARATELY

## **Please Print**

Name:				
	LAST		FIRST	MI
Are you a former or current C	City of Cashmere employ	ree?		
Yes No If Yes, please	tell us:			
When you worked				
Department				
Position Title				
Supervisor				
Having a relative employed by	the City of Cashmere v	vill not necessarily bar you	from employment.	
Do you have any relatives emplo	oyed by the City of Cashn	nere?		
If yes, Please list their name/s a relationship/s	end			
We would appreciate completi committed to non-discriminati for EEO recordkeeping purpo	ion in employment pract			
Sex Female Male				
Ethnic Category (Check one)		can American		
Please tell us how you learned	of this opening by circli	ng the number of the sour	ce	
Local Media      Walk-in		<ul><li>5. Friend/Relative</li><li>6. City of Cashmere En</li></ul>	onlovee	
3. City Website 4. AWC Job Net		7. Other	± •	
APPLICATION ASSEMBI	LY and HIRING PRO	CESS:		
Assemble application mate History, 3: Authorization To this order: cover letter, resurremoved. Staple everything	Release Employment Ime, reference list, etc.	Records, 4: The following 5: Please make this sheet	g optional items may follo	w in
Those applicants who submistages of the selection proce your prospective employer.				