

Town of Yacolt

202 W. Cushman St * PO Box 160 Yacolt, WA 98675 (360)686-3922 * FAX: (360)686-3853

Important Information about the Application Process

- This Employment Application form is to be used for all internal, external, and seasonal or temporary job postings. We strongly encourage you to provide a resume and cover letter in addition to this application form.
- Carefully read the job announcement for the position you are applying for. Applicant materials and communications will be
 considered as determined appropriate by the Town during our screening and selection process. Therefore, it is important that all
 materials be accurate, neat and complete. Once received, all application materials become the property of the Town of Yacolt.
- Employment with the Town may require transfer to different shifts or work locations. In the case of some positions, this may include
 overtime or evening, weekend or holiday hours. In accepting employment with the Town, you are affirming your ability to accept
 such transfers and hours.
- In accordance with Federal law proof of identity and proof of authorization to work in the United States is required upon employment.
 This may also include individuals who have the right to work under an employment visa or similar document.
- If you require special arrangements to participate in the application or selection process, due to a disability, please contact Human Resources.
- We accept applications only for positions which are currently posted.
- Unless otherwise stated in the job announcement, only complete Town of Yacolt Employment Applications will be considered in the
 selection process. All materials submitted along with your application become property of the Town of Yacoltand will be used in our
 selection process. By signing this application you are affirming that all information you provide is accurate and complete.
- If there are supplemental questions on the announcement, answers must be submitted with the employment application before the
 closing deadline in order to be considered for the position. Incomplete or late application materials will not be considered.
- Applications are considered active for 90 calendar days. Please keep a copy for your files.

Applicant Information

A separate application must be submitted for each position you are applying for. Please submit only **one (1)** copy per recruitment.

Position Title Applying For:				
11,70				
First Name:	Last	t Name:		
Address:				
City:	State	te:		Zip Code:
,				
Email Address:				
Home Phone: () -	Day Time Phone: (()	-	Extension:

Employment History

- Be sure to describe in this section the duties you have performed which demonstrate that you have the knowledge and skills to perform the duties of the job for which you are applying. You may include on-the-job training, internship, volunteer activity, self-employment, and military experience.
- If a supplemental questionnaire, resume, certification or other information is required, it should accompany this application.
- Begin with your most recent job or assignment first and list each job separately, extending for a period of 10 years.
- Additional pages of work history may be attached if necessary.
- A resume, while strongly encouraged, is not a substitute for this application unless otherwise noted in the job announcement.

Current or Most Recent Job Title:		Start Date:	End Date:			
Employer:		Phone: () -				
Employer Address:						
If this is your current employer may we contact them if you become	ome a finalist for the	his position? Yes No No				
Supervisor:	ervisor: Number of people you supervised in this position:					
Starting Salary:						
Reason for Leaving:						
Duties and Responsibilities:						
Job Title:		Start Date:	End Date:			
Employer:		Phone: () -				
Employer Address:		,				
May we contact this employer? Yes No No	ha da a bha dha ann an ann an ann an ann an ann an ann an a					
Supervisor:	Number of people you supervised in this position:					
Starting Salary:						
Reason for Leaving:						
Duties and Responsibilities:						
		Otant Data	Tad Date:			
Job Title:		Start Date:	End Date:			
Employer:		Phone: () -				
Employer Address:						
May we contact this employer? Yes No						
Supervisor:	Number of people you supervised in this position:					
Starting Salary:	Ending Salary:					
Reason for Leaving:						

Duties and Responsibilities:							
Job Title:			Start	: Date:	En	d Date:	
Employer:	Employer:			Phone: () -			
Employer Address:							
May we contact this employer?	Yes No No						
Supervisor:	Number of people you su			supervised in this position:			
Starting Salary:	Ending Salary:						
Reason for Leaving:							
Duties and Responsibilities:							
Education, Training,	Certificates & Licer	ises					
Do you have a high school dipl							
Col	leges, universities, mi	litary, trade, I Courses of Study			hools attend Completed	Specify Degree or	
Name of School	Location of School	(Major)		Semester Quarter hours hours		Certificate Earned	
No.							
Note: A valid driver's license is required for positions where vehicle or equipment operation is an essential job function.							
List driver's license or other certif Title of License or Certificate Number		lssuing A			on e Issued/Date of Expiration		
Title of License of Certificate Trumbor			issumg rigonoy		1		
						1	
Do you offer any bi-lingual communications skills which may be helpful to your performance of this job? Yes Language(s): No							
Personal References							
Please provide three (3) non-re	Please provide three (3) non-related references whom we may contact. Name Address & Phone Number Relationship and Years Acquainted				nd Years Acquainted		
IVAILIC	Addles	Address a Filone Number			r totationomp at	ia routo rioqualitiou	

	General Information	
•	Are you now, or have you ever been employed at the Town of Yacolt? Yes No If yes, please select the appropriate employment status: Regular Temporary/Seasona Volunteer Youth	l College Intern
	Please give job title, department, and dates worked:	
•	Do you have relatives employed by the Town of Yacolt? Yes No No If yes, please give name, relationship and department: Note: There are some limitations on the employment of former employees and on the employment separately.	ent of relatives. Each case is considered
•	Are you at least 18 years old? Yes No Note: Due to occupational safety guidelines, some positions may have a minimum age requirer if applicable.	nent, which is noted on the job announcemen
•	What are your salary expectations? (please refer to job announcement for approved range)	_
•	Are you able to safely perform the essential job functions of this position, as noted on the job and accommodation? Yes \[\] No \[\]	nouncement, with or without reasonable
•	Have you been convicted of a crime or served time in prison during the last 10 years? Yes If yes, attach additional page with explanation of conviction(s) to this application. Please include disposition. Note: A conviction is not an automatic bar to employment. Each case is considered duties of the position.	the date, exact charge, jurisdiction and
ertif	ication of Information, Authorization & Release	
Y MY	SIGNATURE BELOW, I:	
•	Understand that as required by the Health Insurance Portability and Accountability Act of 1996, information, except as provided in the Town of Yacolt's Notice of Privacy Practices, without my a indicates that I am giving permission for the uses and disclosures of protected health information may revoke this authorization at any time by contacting the Town of Yacolt Mayor;	uthorization. My signature on this form
•	Certify that all information I provide as part of this application process is true and complete to the that any misstatement of fact may result in my disqualification from consideration for Town of Ya Town employment;	e best of my knowledge and that I understand colt employment or in the termination of my
•	Authorize the Town of Yacolt to contact my prior employers, educational institutions, references have been associated to give the Town of Yacolt any pertinent information about my employabil	and any institution or organization with whon ity;
•	Release the individual, company, institution or organization and all individuals connected therew giving such information; and further release the Town of Yacolt from all liability whatsoever incur	ith from all liability whatsoever incurred in red in obtaining and/or using such information
•	Release the Town of Yacolt, its employees, and agents from all liability and/or claims whatsoever information.	er related to obtaining and/or using such
	Signature of Applicant	Date

^{*}Special Note: Original signature is required.

Town of Yacolt
P.O. Box 160
Yacolt, WA. 98675
360-686-3900

RE: Authorization to release driving record

I _______ am authorizing the Town of Yacolt to obtain my motor vehicle driving record on my behalf.

Signature Date

BACKGROUND & CREDIT CHECK DISCLOSURE AND AUTHORIZATION FORM DISCLOSURE

This form, which you should read carefully, has been provided to you because Town of Yacolt may request consumer reports on you from a consumer reporting agency. The Town of Yacolt will use any such report(s) solely for employment purposes, including those associated with employees, volunteers, and others performing work for the Town of Yacolt Consumer reports on you will be obtained by agencies at the discretion of the Clerk Treasurer of Yacolt. Information that may be obtained includes social security number verification, criminal records, public court records, educational records, verification of volunteer and/or employment positions held and verification of licensing and certifications. The information contained in these reports may be obtained by from private and/or public record sources including sources identified by you in your job application.

- A credit history will be procured *only* if the position you are applying for has fiduciary or cash handling responsibility, you would be issued a corporate credit card once employed, or if you will be entering into a relocation agreement.
- A driving records check will be procured *only* if the position you are applying for requires a valid driver's license.

With this Disclosure and Authorization form you are also being provided a copy of a "Summary of Your Rights Under the Fair Credit Reporting Act" as issued by the Federal Trade Commission.

AUTHORIZATION

By signing your name below you:

- Indicate you have carefully read and understand this Disclosure and Authorization form
- Consent to the release of consumer reports to the Town of Yacolt in conjunction with your job application
- Understand that if the Town of Yacolt hires you, your consent will apply throughout your employment unless you revoke or cancel your consent in writing by sending a signed letter or statement to the company
- Authorize the disclosure to Town of Yacolt of information concerning your employment history, earning history, education, criminal history, credit history (when pertinent to the position being applied for) and motor vehicle history (when pertinent to the position being applied for).

This Disclosure and Authorization form, in original, faxed, photocopied or electronic form, will be valid for any reports that may be requested by the Town of Yacolt .

SIGNATURE:	DATE:	
PRINTED NAME: _		

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment or to take another adverse action against you must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your file disclosure). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if: a person has taken adverse action against you because of information in your credit report;

- > you are the victim of identify theft and place a fraud alert in your file;
- > your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- > you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.

You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.ftc.gov/credit.