



9605 NE 24<sup>th</sup> Street • Clyde Hill, Washington 98004  
 425-453-7800 • Fax: 425-462-1936 • www.clydehill.org

Last name      First      MI			Applying for Position:			Date of application:		
Street address						E-Mail Address:		Social Security #:
City		State		ZIP		Evening Telephone #:		Day Telephone #:
How were you referred? (Circle only one.)	<b>A</b> By your college	<b>B</b> Newspaper Advertisement	<b>C</b> AWC Website	<b>D</b> By an employee	If so, please give name:	<b>E</b> Open house	<b>F</b> Walk-in	<b>G</b> Other

***Please read carefully and complete by printing in ink or typing***

***An Equal Opportunity Employer***

The City of Clyde Hill is an equal opportunity employer, and does not discriminate in any employer/employee relations based on race, color, religion, sex, sexual orientation, national origin, age, marital status, disability, genetic information, veteran's status or any other basis protected by applicable discrimination laws.

***Please Provide All Information Requested***

Your complete application form will be maintained in our active files for six (6) months from the date of application. You may submit a new application at any time. Please DO NOT submit a photograph of yourself.

**Employment Record:**

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Last or present company		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City		State		ZIP code	
Supervisor's name			Phone number		
Base salary		Dates worked			
		From	To		
Reason for leaving					
Last or present company		Type of business		Type or classification of job	
Street address			Phone number		Brief description of job duties
City		State		ZIP code	
Supervisor's name			Phone number		
Base salary		Dates worked			
		From	To		
Reason for leaving					



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**Additional Employment Record:**

Starting with present or most recent, list all previous employers. Include self-employment and summer and part-time jobs. If more space is required, please continue on a separate sheet. You may attach a resume, but complete this application as well.

Previous company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary	Dates worked From	To	
Reason for leaving			
Previous company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary	Dates worked From	To	
Reason for leaving			
Previous company		Type of business	Type or classification of job
Street address		Phone number	Brief description of job duties
City	State	ZIP code	
Supervisor's name		Phone number	
Base salary	Dates worked From	To	
Reason for leaving			

**Educational History:**

School name	Location (city, state)	Major course or subject	Dates attended		Graduated		Degree
			From	To	Yes	No	
High school							
Technical/trade (after high school)							
College (list all attended)							
Other education/training							

**Outside Activities:**

(Please exclude those indicating race, color, religion, sex, sexual orientation, national origin, age, marital status, disability, genetic information, veteran's status or any other basis protected by applicable discrimination laws)

Professional memberships, certificates, or licenses held:

Past and present civic or cultural activities — include offices held:

Principal hobbies:

**Special Skills:**

*To be completed by applicant for office/clerical work*

*To be completed by applicant for shop/plant work*

<i>To be completed by applicant for office/clerical work</i>			<i>To be completed by applicant for shop/plant work</i>	
Typing	Yes No	Words per minute:	Type of machines operated	Years experience
Dictation	Yes No	Words per minute:		
Computer skills	Hardware Software			
Please list other skills and/or equipment/language experience you have acquired			List other shop/production skills	
			Served apprenticeship	Yes Type: No

**Military Record:**

Branch of Service: \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Present military affiliation:

None                      Reserve (active)                      Reserve (inactive)

Kinds of training and duty while in service? \_\_\_\_\_

Do you wish to claim Veteran's Preference for testing, pursuant to RCW 41.04.010?    **YES**    **NO**

**Professional/Work References:**

List two past supervisors and one person who is not related to you that have knowledge of your qualifications for the position:

Name	Title/relationship	Address (street, city, state, ZIP code)	Phone no. (Include area code)	Occupation

May we contact your present employer?                      **YES**    **NO**

Wage or salary required: \_\_\_\_\_

Date available: \_\_\_\_\_

**U.S. CITIZENSHIP:** 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**

**CRIMINAL CONVICTION:** The City of Clyde Hill is mindful of its obligation to employ qualified persons and its entitlement under law to consider an applicant's 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, other than minor traffic offenses, within the past three (3) years?    **YES**    **NO**

If yes, please explain: \_\_\_\_\_

I hereby certify that the answers and other information provided on this application are true and complete and that I have read the job description and I can perform the essential functions of the position for which I am applying, with or without reasonable accommodation. I understand that if I receive a conditional offer of employment for a position where I will have unsupervised access to children, developmentally disabled persons or vulnerable adults, the City is required to complete a thorough background check as required by the Child/Adult Abuse Information Act. I authorize investigation of all statements in this application. I also understand that providing false information on this application is grounds for disqualification and/or dismissal. If I am applying for an exempt position, I understand that nothing in this application or my communications with any City official is intended to create an employment contract between the City of Clyde Hill and me.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

If any of your educational or employment records are under other than the above name, please provide other names