

City of Cannon Beach
Application for Employment

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING

- Answer all questions completely and accurately. Incomplete or illegible applications may be rejected.
- False or misleading statements on this form and/or during an interview are grounds for terminating the application process, or if discovered after employment, are grounds for terminating employment.
- If you feel that you have need for special testing arrangements due to physical limitations, call (503) 436-1581
- Return your completed, signed and dated application, along with any other requested materials by the advertised deadline to:
City of Cannon Beach, P.O. Box 368, Cannon Beach, OR 97110

Position Applied For:		Date of Application:
Where Did you Hear About the Job?		
Name:		
Address:	Apt #:	Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
City:	State:	Zip:
		Do you have a valid Oregon driver's license? <input type="checkbox"/> Yes <input type="checkbox"/> No # _____
Telephone (Day):	Telephone (Message):	Email:

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EDUCATION		Did you graduate from high school? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED				
College or University	Major	Minor	Units Completed		Degrees Received	Year Received
			Semester	Quarter		

Licenses, Certificates, Other Courses or Training			
Description	Issued by	Number	Expiration Date



EMPLOYMENT HISTORY

Please list your employment history for the past ten years. Begin with your most recent position. **Attach extra sheets if necessary.**
Do not substitute a resume for the information requested.

Job Title	Supervisor	Dates Employed	
		From	To
Employer	Telephone #		
Address		Hourly Rate/Salary	
		Starting	Final
Reason for Leaving:			
Description of Job Duties/Work Performed:			
Job Title	Supervisor	Dates Employed	
		From	To
Employer	Telephone #		
Address		Hourly Rate/Salary	
		Starting	Final
Reason for Leaving:			
Description of Job Duties/Work Performed:			
Job Title	Supervisor	Dates Employed	
		From	To
Employer	Telephone #		
Address		Hourly Rate/Salary	
		Starting	Final
Reason for Leaving:			
Description of Job Duties/Work Performed:			

COMPUTER SKILLS – List software programs and/or hardware and level of proficiency	
Software Applications	Proficiency
Hardware:	Proficiency
List other skills, abilities or other relevant experience that would help you in performing this job:	

REFERENCES -- Please list three people who have knowledge of your skills and abilities.		
Name:	Relationship:	Telephone:
Name:	Relationship:	Telephone:
Name:	Relationship:	Telephone:
Do you authorize the City to obtain information regarding your job performance from previous employers? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Exceptions:		
Are you currently employed? <input type="checkbox"/> Yes <input type="checkbox"/> No	May we contact your present employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I hereby certify that all statements made in this application are true and complete to the best of my knowledge. I agree with and understand that any misstatement of material fact contained in this application may cause me to forfeit all rights to employment with the City of Cannon Beach.

Signature of Applicant

Date

THIS SPACE FOR PERSONNEL USE ONLY	
Application:	<input type="checkbox"/> Accepted <input type="checkbox"/> Rejected
Reason for Rejection:	<input type="checkbox"/> Experience <input type="checkbox"/> Filing Period Closed <input type="checkbox"/> Education <input type="checkbox"/> Incomplete <input type="checkbox"/> Other
Reviewer's Initials: _____	Date Reviewed: _____
Reviewer's Comments:	