



# City of Phoenix

*Heart of the Rogue Valley*

AN EQUAL OPPORTUNITY EMPLOYER  
 112 W 2<sup>nd</sup> Street • Phoenix, OR 97535

(541) 535-1955 • FAX (541) 535-5769

## EMPLOYMENT APPLICATION

PERSONAL INFORMATION

Last Name		First Name	
Address			
City	State	Zip	
Phone	Email Address		

POSITION YOU ARE APPLYING FOR

Position	Date you can start	Salary Desired
Are you employed now? Yes ____ No ____ If so, may we contact your present employer? Yes ____ No ____		
Are you a previous City of Phoenix employee? Yes ____ No ____		Dates employed
Reason for Leaving		
How did you learn about this job opening?		

EDUCATION

School Level	Name & Location	No. of years attended	Graduate? Yes / No	Subjects Studied
High School				
College				
Trade, Business or Correspondence				

GENERAL

Subjects of Special Study or Research Work
Special Training
Special Skills

Starting with most recent employer, list last three employers:

**CURRENT OR PREVIOUS  
EMPLOYMENT**

<b>Name of Present or Last Employer</b>			
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Job Title</b>	<b>Start Date</b>	<b>Leave Date</b>	
<b>Reason for leaving or desiring to leave</b>			
<b>Name of Supervisor/Title</b>	<b>Phone</b>	<b>May we contact? Yes ____ No ____</b>	
<b>Description of Work</b>			

**PREVIOUS  
EMPLOYMENT**

<b>Name of Previous Employer</b>			
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Job Title</b>	<b>Start Date</b>	<b>Leave Date</b>	
<b>Reason for leaving</b>			
<b>Name of Supervisor/Title</b>	<b>Phone</b>	<b>May we contact? Yes ____ No ____</b>	
<b>Description of Work</b>			

**PREVIOUS  
EMPLOYMENT**

<b>Name of Previous Employer</b>			
<b>Address</b>	<b>City</b>	<b>State</b>	<b>Zip</b>
<b>Job Title</b>	<b>Start Date</b>	<b>Leave Date</b>	
<b>Reason for leaving</b>			
<b>Name of Supervisor/Title</b>	<b>Phone</b>	<b>May we contact? Yes ____ No ____</b>	
<b>Description of Work</b>			

**REFERENCES**

Name	Email Address	Phone	Years Acquainted

**VETERANS' PREFERENCE**

<p><b>Are you a veteran of the US Armed Forces? Yes ___ No ___</b>  <i>If yes and you want to use Veterans' Preference, you must provide a copy of your DD214/DD215 form or a letter from the U.S. Department of Veterans Affairs indicating receipt of a non-service connected pension.</i></p>
<p><b>Do you have a service-connected disability? Yes ___ No ___</b>  <i>If yes and you want to use Veterans' Preference, you must provide a copy of your Veterans' Preference Letter from the U.S. Department of Veterans Affairs.</i></p>
<p><b>Please describe any transferrable skills obtained through military education or experience that substantially relate to the position being applied for:</b></p>     

**AUTHORIZATION**

PLEASE READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION. ONLY THOSE APPLICATIONS THAT ARE SIGNED AND DATED ARE CONSIDERED VALID. DIGITAL SIGNATURES ARE ACCEPTABLE. IF YOU HAVE ANY QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.

***I understand and agree that:***

1. The answers and information that I have provided on this application, and any résumé or other supplementary materials, are true and complete without omissions. I understand that any false information will be grounds for refusal to hire or for immediate discharge if I am employed. I authorize any of the persons or organizations named in this application to give the City of Phoenix complete information and records regarding my employment, education, character, and qualifications.
2. I understand that information regarding my prior compensation is not being requested with this application, nor will prior compensation be considered in determining an original offer of employment in the event an offer is presented.
3. I will be responsible for familiarizing myself with all rules and regulations of the City of Phoenix as they presently exist or are later modified. *I recognize that if I am hired, my employment can be terminated at the discretion of the City of Phoenix or at my option at any time without notice, except as specifically set forth in writing in a current individual employment contract signed by an authorized representative of the City.*
4. I also understand that no representative of the City has any authority to enter into any employment agreement for any specified period of time, or to assure me of any future position, benefits, or terms and conditions of employment, except in a current individual employment contract signed by an authorized representative of the City. I further understand that if I am hired, the City of Phoenix reserves the right to revise the terms and conditions of my employment as it deems necessary.

Signature	Date
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***The City of Phoenix is an equal employment opportunity employer. All applicants will be considered on the basis of their qualifications without regard to age, race, color, national origin, gender, religion, disability, or other protected status in accordance with applicable federal, state, and local equal employment opportunity laws.***