



CITY OF CENTRAL POINT

HUMAN RESOURCES DEPARTMENT
140 S 3RD STREET
CENTRAL POINT OR 97502
(541) 423-1046 PHONE
(541) 664-4225 FAX
HR@CENTRALPOINTOREGON.GOV

EMPLOYMENT APPLICATION

The City of Central Point is a non-discriminatory, equal opportunity employer. All applicants are considered without regard to their race, color, religion, sex, age, marital status, national origin, status as an individual with a disability, or other protected status, in accordance with applicable state and federal equal employment opportunity laws.

No one shall be employed by the City of Central Point unless a complete, signed employment application and other required employment paperwork has been submitted to the City of Central Point Human Resources office prior to the posted closing date and time. Completing and submitting an employment application does not guarantee an interview or employment. Applications will be accepted only for currently posted positions. Unsolicited applications will not be considered and will be destroyed after being retained for three months in accordance with OAR 166-200-0090.

The application you submit is a reflection of you as a potential employee. Be sure it reflects well.

- *All information about the position and application process can be found on the City's website at www.centralpointoregon.gov.*
- *If, after reviewing the information on the city's website, you have questions about the application or the position, contact Human Resources at hr@centralpointoregon.gov or 541-423-1046.*
- *Late applications will not be accepted.*
- *Unsigned or incomplete applications may be rejected. Supplemental forms and documents identified as required must be submitted in addition to the "application form" in order for your application to be considered complete.*
- *The ONLY information considered in the initial screening of applications is the information you provide in the application packet. Be specific about your skills and experience; i.e., "office work" or "people skills" can mean something different to you than to the person reviewing your application.*
- *REVIEW your application for completeness and accuracy before submitting it.*
- *Employment applications and all associated documents become the property of the City of Central Point and will not be returned to the applicant. Make a copy of your application materials prior to submitting them.*
- *If your contact information changes after you submit your application, please contact Human Resources with the updated information.*
- *Our selection process takes time—sometimes up to two months from the initial vacancy posting.*
- *No applications will be reviewed until after the position closes (see posting for closing date).*
- *All applicants will be notified of the final status of their application as soon as practical. Until a final selection is made, all inquiries will normally be told the position is "in the screening process."*

Submit signed, completed application to:
Or fax to: 541.664.4225
You may call 541-423-1046 or email
hr@centralpointoregon.gov to confirm
receipt of your application/legibility of fax

City of Central Point
Attn: Human Resources
140 S 3rd Street
Central Point OR 97502



PRINT YOUR NAME HERE: _____
DATE SUBMITTED: _____
POSITION APPLIED FOR: _____

EMPLOYMENT APPLICATION
Equal Opportunity Employer

PERSONAL INFORMATION:

Last Name: _____ First Name: _____ MI: _____
Street Address: _____ City: _____ ST: _____ Zip: _____
Mailing Address: _____ City: _____ ST: _____ Zip: _____
Contact Information: Primary Phone #: _____ Alternate Phone #: _____
Email Address (please write clearly) _____

Contact with applicant, ~~if a~~ be via email if an email address is supplied.

Do you have a legal right to work in the United States? <i>If selected, proof of eligibility to work will be required.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been employed by the City of Central Point?	<input type="checkbox"/> Yes, in _____ (year/s) <input type="checkbox"/> No
Do you have a high school diploma or GED? If Yes, list name and location (city and state) of issuing authority (i.e., high school, branch of military, etc): If No, list highest grade of school you completed:	<input type="checkbox"/> Yes <input type="checkbox"/> No
<i>Some positions require possession of a driver's license or ability to operate vehicles.</i>	
Do you have a Driver's License? <input type="checkbox"/> Yes <input type="checkbox"/> No State: _____ # _____	CDL? <input type="checkbox"/> "A" <input type="checkbox"/> "B"
<i>Some positions may require night, evening and/or weekend work.</i>	
Are you available to work: <i>Nights?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Evenings?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Weekends?</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	

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EDUCATION/SPECIALIZED TRAINING: List any education beyond high school. Attach additional page(s) if necessary. Note: for positions requiring a college degree and/or minimum education or certification, any job offer will be contingent upon receipt of official college transcripts and/or proof of certification.

<i>Name of School</i>	<i>Location (City & State)</i>	<i>Major/Course of Study</i>	<i>Credits Completed</i>	<i>Degrees Completed</i>

EMPLOYMENT HISTORY: Starting with your current or most recent job, provide an accurate and complete record of your work history. At a minimum, you must list ALL full-time, part-time, paid and unpaid work history a) for at least 10 years **and** b) sufficient to support your qualifications for the position. Attach additional pages if necessary. A résumé (or "see résumé") will **not** be accepted as a substitute for completing this section. _____

➤ **CURRENT or MOST RECENT EMPLOYMENT**

Dates of Employment:	Mo/Yr began: _____	Mo/Year ended: _____	<input type="checkbox"/> still working here
Employer/Company:	_____		Full <input type="checkbox"/> Part Time <input type="checkbox"/>
Your Job Title:	_____	Average hours/week: _____	
Employer's Address:	_____	Phone #: _____	
City:	_____	State: _____	Zip: _____
Direct Supervisor's Name & Title:	_____		
Number of People You Supervised:	_____	Last Salary: \$ _____	<input type="checkbox"/> year <input type="checkbox"/> month <input type="checkbox"/> hour
Reason for Leaving (or considering leaving):	_____		
Describe the specific duties and responsibilities you performed:			

➤ **PREVIOUS EMPLOYMENT** (list jobs in reverse order with most recent employment listed before older jobs)

Dates of Employment:	Mo/Yr began: _____	Mo/Year ended: _____	
Employer/Company:	_____		Full <input type="checkbox"/> Part Time <input type="checkbox"/>
Your Job Title:	_____	Average hours/week: _____	
Employer's Address:	_____	Phone #: _____	
City:	_____	State: _____	Zip: _____
Direct Supervisor's Name & Title:	_____		
Number of People You Supervised:	_____	Last Salary: \$ _____	<input type="checkbox"/> year <input type="checkbox"/> month <input type="checkbox"/> hour
Reason for Leaving (be specific):	_____		
Describe the specific duties and responsibilities you performed:			

Dates of Employment: Mo/Yr began: _____ Mo/Year ended: _____
Employer/Company: _____ Full Part Time
Your Job Title: _____ Average hours/week: _____
Employer's Address: _____ Phone #: _____
City: _____ State: _____ Zip: _____
Direct Supervisor's Name & Title: _____
Number of People You Supervised: _____ Last Salary: \$ _____ year month hour
Reason for Leaving (be specific): _____
Describe the specific duties and responsibilities you performed:

Dates of Employment: Mo/Yr began: _____ Mo/Year ended: _____
Employer/Company: _____ Full Part Time
Your Job Title: _____ Average hours/week: _____
Employer's Address: _____ Phone #: _____
City: _____ State: _____ Zip: _____
Direct Supervisor's Name & Title: _____
Number of People You Supervised: _____ Last Salary: \$ _____ year month hour
Reason for Leaving (be specific): _____
Describe the specific duties and responsibilities you performed:

Dates of Employment: Mo/Yr began: _____ Mo/Year ended: _____
Employer/Company: _____ Full Part Time
Your Job Title: _____ Average hours/week: _____
Employer's Address: _____ Phone #: _____
City: _____ State: _____ Zip: _____
Direct Supervisor's Name & Title: _____
Number of People You Supervised: _____ Last Salary: \$ _____ year month hour
Reason for Leaving (be specific): _____
Describe the specific duties and responsibilities you performed:

If you need more space, attach additional page(s) using this format to list additional jobs.

Does the employment history listed above constitute your entire work history?

Yes. I have had no other work/employment.

No, but I have listed at least 10 full years of work/employment history.

No. I am not providing the requested information; I understand this may adversely impact my application.

Complete this page in your own handwriting. Even if you have filled out the rest of the application on the computer, you must print the application and complete this page before submitting the application.

Hand write a paragraph here about why you want this job.

**READ THE FOLLOWING STATEMENTS CAREFULLY BEFORE SIGNING THIS APPLICATION.
ONLY SIGNED AND DATED APPLICATIONS WILL BE CONSIDERED. IF YOU HAVE ANY
QUESTIONS REGARDING THESE STATEMENTS, PLEASE ASK THEM BEFORE SIGNING.**

I certify that all answers and statements I have made on this application, résumé and/or any other supplementary materials are true and complete without omissions, and that I am eligible for employment in the United States. I understand that any false information given in my application, supplemental materials, or interview(s) will be grounds for refusal to hire or for immediate discharge if I am employed, regardless of when discovered. I authorize any of the persons or organizations named in this application or referred by those named to give the City of Central Point complete information and records regarding my employment, education, character and qualifications. I understand that, pursuant to Municipal Code 2.54 and Oregon Administrative Rule 257-10-025, I will be subject to a criminal records check and reference checks if I am considered a finalist for the position I have applied for.

Yes No

I agree to conform to all rules and regulations of the City of Central Point as they presently exist or are later modified. **I recognize that, if employed, my employment can be terminated, at the discretion of the Employer or at my option, at any time, except as specifically set forth in writing in a current collective bargaining agreement or City policy.** I also understand that only the City Manager or his/her authorized designee may make an offer of employment, and that no other representative of the Employer 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 as specifically approved, in writing, by the City Manager or his/her authorized designee.

Yes No

This application and its attachments become the official property of the City of Central Point and will not be returned reused, photocopied for, or made available to the applicant after being submitted. The applicant should retain a copy of the application and any attachments for future use or reference.

A complete, signed application is required to be considered for any position, and a separate application is required for each position for which the applicant wishes to be considered.

I have read, understand and agree with the above.

Signature of Applicant

Date



City of Central Point
Confidential EEO Information Form and Recruitment Survey

MAINTAINED FOR RECORD-KEEPING PURPOSES ONLY

The City of Central Point appreciates your interest in employment with our organization. As a public employer, we comply with federal employment regulations and, as such, need to collect, record, and compile personal data about applicants. In addition to applicant data, we find it helpful, to collect information to determine the effectiveness of our recruitment efforts. This form will be detached from your employment application at the time it is received in Human Resources and will be kept in a confidential file completely separate from your application materials. This information is for record-keeping purposes ONLY and will NOT be used by anyone responsible for making a hiring decision.

Providing the information requested on this form is VOLUNTARY. You do not have to complete this page; failure to provide this information will in no way affect your being considered for employment with the City of Central Point. Please attach this page to your application materials even if you do not provide the information.

Your assistance is appreciated. *Thank you*

Section I – EEO/AFFIRMATIVE ACTION DATA

Your Name: _____

Position You Have Applied For: _____

Date of Application: _____

Gender:

Female Male

Race/National Origin:

(please mark one)

- American Indian or Alaskan Native
 Asian
 Native Hawaiian or other Pacific Islander
 Black or African American, not of Hispanic origin
 Hispanic
 White, not of Hispanic origin
 Two or more races

Section II – RECRUITMENT SOURCE DATA

From what source did you **INITIALLY** learn of this position/vacancy?(please mark only one box)

City of Central Point Website (only mark this if you learned about the position from the website)

City of Central Point Employee: _____

Friend or Relative: _____

The Mail Tribune

Other Newspaper Name/location of newspaper: _____

Other Website Name/URL of website: _____

League of Oregon Cities Website

Oregon State Employment Office/Website

Link on Other Website Name/URL of website with link: _____

Other (please specify): _____

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