

REDMOND AREA PARK & RECREATION DISTRICT

PO Box 843 • 465 SW Rimrock Dr • Redmond, OR 97756 • 541/548-7275

Employment Application



APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Street Address		Apartment/Unit #	
City	State	ZIP	
Home Phone:	Daytime Phone:		
Email address:			
Date Available		Desired Salary	
Position Applied for:			
Position Desired	<input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Temporary		
How did you learn of this position?			
Are you a citizen of the United States?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	If no, are you authorized to work in the U.S.?
			YES <input type="checkbox"/> NO <input type="checkbox"/>
Are you capable of performing the duties of the position applied for with reasonable accommodation?			YES <input type="checkbox"/> NO <input type="checkbox"/>
Have you ever worked for this company? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			

EDUCATION			
High School		Address	
	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Fields of Study
College/Training School		Address	
	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Fields of Study
Other Training		Address	
	Did you graduate?	YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree/Fields of Study

REFERENCES	
<i>Please list three professional references.</i>	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	
Full Name	Relationship
Company	Phone ()
Address	

- ❖ Start with the most recent position.
- ❖ A resume providing this information may be attached.

WORK EXPERIENCE	
Company	Phone ()
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
May we contact your present employer without first contacting you? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Company	Phone ()
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
Company	Phone ()
Address	Supervisor
Job Title	
Responsibilities	
From	To Reason for Leaving
Has any employment ever been involuntarily terminated? YES <input type="checkbox"/> NO <input type="checkbox"/>	

ADDITIONAL QUALIFICATIONS

What knowledge, special technical skills, and/or individual capabilities do you have which prepare you for the position for which you applied?

Did you complete this application yourself? YES NO

If not, who did? Name:

MILITARY SERVICE

Oregon Veterans' Preference in Public Employment (ORS 408.230) legislation requires that public employers grant a preference in employment to eligible veteran or disabled veteran applicants who meet minimum qualifications and any special qualifications for the position to which they apply.

Both external and internal candidates are given the opportunity to establish veteran status when submitting an application for an available position.

Eligibility documentation must be submitted for each application in which the veteran wishes to receive preference; veterans who do not submit required documentation for a review will not receive preference regardless of whether application materials indicate service in the U.S. Armed Forces.

Check here to self-identify as an eligible veteran

Qualifying veterans and disabled veterans may obtain preference by submitting as verification of eligibility a copy of the Certificate of Release or Discharge from Active Duty (DD Form 214 or 215) **or** a letter from the US Dept. of Veterans Affairs indicating receipt of a non-service connected pension to their application. Additionally, disabled veterans must **also** submit a copy of their VA disability preference letter from the US Dept. of Veterans Affairs, unless the information is included in the DD Form 214 or 215.

Eligibility for Preference: Under Oregon law, a veteran is eligible to use the preference for a merit based, competitive open position for which application is made at any time after discharge or release from service in the Armed Forces of the United States.

Branch	From	To
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Military Training and Experience Received:

EQUAL EMPLOYMENT OPPORTUNITY STATEMENT

It is the practice of the Redmond Area Park and Recreation District to ensure employment of individuals on an equal opportunity basis, without discrimination as to race, color, religion, national origin, disability, family relationships, worker's compensation history, sex or age (except where age is a bonafide occupational qualification) within all operations of the District.

APPLICANT STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. The REDMOND AREA PARK AND RECREATION DISTRICT is authorized to review public/criminal records regarding my personal and professional background, and to contact schools, present and past employers, references, and others, and to receive from them any information about my job knowledge, skills and performance. I agree to immediately notify RAPRD if I should be convicted of a crime while my job application is pending, or during my period of employment, if hired.

I authorize REDMOND AREA PARK AND RECREATION DISTRICT to check civil or criminal records to verify any statement made on this form. I understand that a false or incomplete response is ground for releasing me from employment and/or voluntary service immediately upon discovery of the discrepancy.

I hereby release those contacted by the District from any liability or damage, which may result from furnishing the information requested. The District may make copies of this authorization available to those contacted.

I understand that, if selected as a finalist, RAPRD requires applicants, prior to employment, to submit to and pass drug and alcohol testing through urinalysis or blood sampling. These tests are administered and measured by qualified people. There is no fee to you. Drug and alcohol testing may also be required during the course of employment for cause or reasonable suspicion.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application, skill sheets, or interview(s) may result in discharge. I understand, also, that I am required to abide by all policies and procedures of this agency. I further understand that, if selected as a finalist, I will be required to take and pass a drug and alcohol test prior to appointment to this position.

Applicant Signature:

Date:

Note: Failure to sign shall be sufficient cause for disqualification.

Thank you for completing this application form and for your interest in our organization.