

CITY OF PACIFIC – CIVIL SERVICE COMMISSION – EMPLOYMENT APPLICATION

Applicants are considered for employment without regard to race, creed, color, sex, national origin, age, marital status, veteran status, or disability.

POSITION APPLYING FOR: _____

Personal Information

Name _____ Social Security # _____

Address _____
 Number Street Apt. # City State Zip

Work Phone _____ Home Phone _____ email _____

Do you meet the minimum age requirements as stated on the job opening bulletin? YES ___ NO ___

Do you possess a valid driver's license with no pending risk of loss? YES ___ NO ___

Driver's License Number and State issued from _____

Are you related to anyone working for the City of Pacific? YES ___ NO ___

If yes, Name _____ Department _____

Is there any reason that would prevent you from performing the primary functions of the job for which you are applying? YES ___ NO ___ If yes, please explain _____

In compliance with the Americans with Disabilities Act, a disability will be considered only in the context of an applicant's ability to perform primary elements of the job and to determine reasonable accommodation.

Education and Training

Type of School	Name and Location	Major Subject	Circle #	Yrs Completed	Graduate?/Degree
High School			9 10 11 12		GED
College			1 2 3 4		
Business/Vocational			1 2 3 4		
Trade, Other			1 2 3 4		
Military					

Employment History

Begin with your present or most recent job. Include periods of self-employment, military service assignments, volunteer activities. List promotions separately.

Job Title _____ Dates of Employment From _____ To _____

Employer _____ Hours Per Week _____

Supervisor/Title _____ Supervisor's Number _____

Employer's Address _____
Number Street City State ZIP

Briefly describe work duties and level of responsibility _____

Last Salary\$ _____

Number and type of employees supervised _____

May we contact your present employer? YES ___ NO ___

If you are not currently employed, reason for leaving _____

Job Title _____ Dates of Employment From _____ To _____

Employer _____ Hours Per Week _____

Supervisor/Title _____ Supervisor's Number _____

Employer's Address _____
Number Street City State ZIP

Briefly describe work duties and level of responsibility _____

Last Salary\$ _____

Number and type of employees supervised _____

May we contact your present employer? YES ___ NO ___

If you are not currently employed, reason for leaving _____

Job Title _____ Dates of Employment From _____ To _____

Employer _____ Hours Per Week _____

Supervisor/Title _____ Supervisor's Number _____

Employer's Address _____
Number Street City State ZIP

Briefly describe work duties and level of responsibility _____

_____ Last Salary\$

Number and type of employees supervised _____

May we contact your present employer? YES ___ NO ___

If you are not currently employed, reason for leaving _____

Job Title _____ Dates of Employment From _____ To _____

Employer _____ Hours Per Week _____

Supervisor/Title _____ Supervisor's Number _____

Employer's Address _____
Number Street City State ZIP

Briefly describe work duties and level of responsibility _____

_____ Last Salary\$

Number and type of employees supervised _____

May we contact your present employer? YES ___ NO ___

If you are not currently employed, reason for leaving _____

Personal References

List names and addresses of three reliable persons, other than relatives or past employers, who know you well enough to give information about you.

Name _____ Occupation _____

Address _____

Number Street City State ZIP

Home telephone # _____ How long known _____

Name _____ Occupation _____

Address _____

Number Street City State ZIP

Home telephone # _____ How long known _____

Name _____ Occupation _____

Address _____

Number Street City State ZIP

Home telephone # _____ How long known _____

Have you been convicted of a felony or misdemeanor? YES ___ NO ___

If yes, indicate date and nature of offense _____

Have you ever been discharged or asked to resign from employment? YES ___ NO ___

If yes, give complete details (dates, places, reason, name and address of supervisor)

I hereby certify that there are no willful misrepresentations or falsification of statements and answers to questions herein. I am aware that should investigation disclose such misrepresentations or falsifications, this will be grounds for elimination from further consideration or, if employed, for dismissal. I understand that a thorough assessment of my background, behavioral characteristics, traffic record, and criminal history will be conducted. In addition, for Police positions, a polygraph will be conducted.

I authorize my previous employers and the references I have named to furnish the City of Pacific my record, reason for leaving and all information they may have concerning me. I hereby release them and the City of Pacific from all liability for any damage whatsoever arising therefrom. I authorize investigation of all statement in this application.

Signature of Applicant _____ Date _____

NAME: _____ DATE: _____

**Skills Inventory Sheet
Police Specialist II**

1. Are you a citizen of the United States? YES __ NO __
2. Are you at least 21 years of age? YES __ NO __
3. Do you have a valid driver's license with no pending risk of loss? YES __ NO __
4. Do you possess a high school diploma or equivalent? YES __ NO __
5. Have you attended two years of college or business school? YES __ NO __
6. Do you have at least one year experience in a law enforcement office? YES __ NO __
7. Do you agree to undergo an extensive police background investigation including a polygraph and drug screening if you are a final candidate? YES __ NO __

Please list your related work experience, particularly your experience working for a law enforcement agency.

<u>POSITION TITLE</u>	<u>EMPLOYER</u>	<u>DATES OF EMPLOYMENT</u>

Please list you education beyond High School

<u>SCHOOL</u>	<u>PROGRAM/COURSE</u>	<u>DEGREE (YES/NO)</u>

7. How many total years of office experience do you have? _____ years _____ mo.

8. What is your typing speed? _____ words per minute.

9. What computer programs are you familiar with and how would you rate your skill level?

<u>Program</u>	<u>Skill Level</u> (fair, good, excellent)
_____	_____
_____	_____
_____	_____
_____	_____

Skill Level
(fair, good, excellent)

10. Do you have knowledge of: Spillman (records management system) YES__NO__ _____

CAD (computer dispatch system) YES__NO__ _____

Access Certification (Washington State patrol) YES__NO__ _____

11. The City of Pacific gives Veteran's Preference in accordance with state law. Do you claim Veteran's Preference? YES__NO__

If "YES", attach DD214 to this application.

12. Please write a paragraph in black ink about why you believe you should be hired to fill this position.

Application Check List

1. Be sure to sign your application
2. Attach a copy of your resume if desired.
3. Faxed or emailed applications are not accepted.
4. Return your application by mail or hand delivered to:

Pacific City Hall
Attention Civil Service Secretary
100 3rd Ave. SE
Pacific, WA 98047
5. If there is a closing date on the job announcement, your application must be received at City Hall by that date and time.
6. Questions? Leave a message for Gail Bennett, Civil Service Secretary, at (253) 929-1125 or send an email to gbennett@ci.pacific.wa.us