



# City of Dayton Employment Application

## **An Equal Opportunity Employer**

The City of Dayton is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Applicants requiring accommodation in completing the application, testing and/or interview process should contact the City Clerk-Treasurer's Office, 111 S. 1<sup>st</sup> Street, Dayton, WA, 99328, (509) 382-2361, or [info@daytonwa.com](mailto:info@daytonwa.com) for assistance.

*Please print and fill out all sections*

## **Applicant Information**

Applicant Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

How were you referred to the City?: \_\_\_\_\_

## **Employment Position(s)**

Position(s) applying for: \_\_\_\_\_

## **Are you applying for:**

- Temporary work – such as summer or holiday work?  Y or  N
- Regular part-time work?  Y or  N
- Regular full-time work?  Y or  N

What days and hours are you available for work? \_\_\_\_\_

If hired, on what date can you start working? \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Can you work on the weekends?  Y or  N

Can you work evenings?  Y or  N

Are you available to work overtime?  Y or  N

Salary desired: \$ \_\_\_\_\_

**Personal Information**

Have you ever applied to / worked for City of Dayton before?  Y or  N

If yes, please provide name of position and approximate date of application:

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Do you have any friends, relatives, or acquaintances working for the City of Dayton?

Y or  N

If yes, state name & relationship: \_\_\_\_\_

If hired, would you have transportation to/from work?  Y or  N

Are you over the age of 18? (If under 18, hire is subject to verification of minimum legal age.)

Y or  N

If hired, would you be able to present evidence that you legally can work in the United States?

Y or  N

If hired, are you willing to submit to and pass a controlled substance test?  Y or  N

Are you able to perform the essential functions of the job for which you are applying for?

Y or  N

*(Note: City of Dayton complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions. It is possible that a hire may be tested on skill/agility and may be subject to a medical examination conducted by a medical professional.)*

Have you ever been arrested of a criminal offense (felony or misdemeanor)?

Y or  N

If yes: The arrest occurred within the last 10 years?  Y or  N

Charges still pending? \_\_\_\_\_ Charges have been dismissed? \_\_\_\_\_

Did the arrest lead to a conviction of a crime that would adversely affect job performance?

Y or  N

*(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)*

**Education, Skills and Qualifications/Experience**

**High School:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

If yes, degree / diploma earned: \_\_\_\_\_

If no, number of years completed: \_\_\_\_\_

**College / University:**

School name: \_\_\_\_\_

School address: \_\_\_\_\_

School city, state, zip: \_\_\_\_\_

Did you graduate? [ ] Y or [ ] N

If yes, degree / diploma earned: \_\_\_\_\_

If no, number of years completed: \_\_\_\_\_

**Military:**

Branch: \_\_\_\_\_

Rank in Military: \_\_\_\_\_

Total Years of Service: \_\_\_\_\_

Skills/duties: \_\_\_\_\_

Related details: \_\_\_\_\_

**Skills and Experience/Qualifications: Licenses, Training, Awards, Experience**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Employment History**

**Present or Last Position:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (if available): \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Primary Responsibilities: \_\_\_\_\_

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Salary: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**Previous Employers:**

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (if available): \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Primary Responsibilities: \_\_\_\_\_

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Salary: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (if available): \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Primary Responsibilities: \_\_\_\_\_

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Salary: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone: \_\_\_\_\_

Email (if available): \_\_\_\_\_

Position Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Primary Responsibilities: \_\_\_\_\_

Salary: \$ \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

**MAY WE CONTACT YOUR PRESENT EMPLOYER?**

Y or  N

**REFERENCES:**

Please provide at least three non-related references, including Name, Title , Address and Phone Number information:

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**\*PLEASE READ CAREFULLY BEFORE SIGNING\***

I hereby certify that all of the information provided by me in this application (or any other accompanying or required documents) is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation or omission of any facts in said documents will be cause for denial of employment or immediate termination of employment regardless of the timing or circumstances of discovery.

I understand that submission of an application does not guarantee employment. I further understand that, should an offer of employment be extended by City of Dayton (hereinafter referred to as "City") that such employment with City is at will, for no specified duration and may be terminated by either City or myself at any time, with or without cause or notice.

I understand that none of the documents, policies, procedures, actions, statements of City or its representatives used during the employment process is deemed a contract of employment real or implied. I understand that no representative of City except the city Council has the authority to enter into any agreement guaranteeing any conditions of employment or any agreement contrary to the foregoing statements and that any such agreements must be made in writing and signed by the Mayor of City.

In consideration for employment with City, if employed, I agree to conform to the rules, regulations, policies and procedures of City at all times and understand that such obedience is a condition of employment. I understand that due to the nature of City business, attendance and punctuality are considered essential requirements of every job at City and that poor attendance or tardiness will result in disciplinary action.

I understand that if offered a position with City, I may be required to submit to a pre-employment medical examination, drug screening and background check as a condition of employment. I understand unsatisfactory results from, refusal to cooperate with, or any attempt to affect the results of these pre-employment tests and checks will result in withdrawal of any employment offer or termination of employment if already employed.

I hereby authorize any and all schools, former employers, references, courts and any others who have information about me to provide such information to City and/or any of its representatives, agents or vendors and I release all parties involved from any and all liability for any and all damage that may result from providing such information.

I understand that this application is considered current for three months. If I wish to be considered for employment after this period I must fill out and submit a new application.

**BY SIGNING BELOW I ACKNOWLEDGE THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ABOVE STATEMENTS.**

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Signature of applicant

Date