

LINN COUNTY EMPLOYMENT APPLICATION

P. O. Box 100, Albany, OR 97321; 541-967-3825

PLEASE PRINT OR TYPE (Completed both sides; if additional space is needed, attach separate page)

POSITION APPLYING FOR:				JOB CLASSIFICATION NO:			DATE			
NAME: LAST	FIRST INITIAL									
ADDRESS: C				ITY: STATE: ZIP:						
EMAIL ADDRESS:				WHEN WOULD YOU BE AVAILABLE TO START?						
TELEPHONE NO. () CELL NO. (ARE YOU 18 YEARS OLD OR OVER?					OVER?		
ARE YOU LEGALLY AUTHORIZED TO WORK IN THE UNITED STATES WITHOUT RESTRICTIONS? YES NO			DO YOU HAVE A VALID DRIVER'S LICENSE? YES NO STATE: LICENSE NO:							
ARE YOU ABLE TO PERFORM THE JOB FUNCTIONS FOR THE POSITION YOU ARE APPLYING FOR AS INDICATED IN THE JOB CLASSIFICATION AND ANNOUNCEMENT? YES NO			HAVE YOU EVER BEEN EMPLOYED BY LINN COUNTY? ☐ YES ☐ NO IF, YES, WHEN WERE YOU EMPLOYED?							
DID YOU GRADUATE FROM HIGH SCHOOL? ☐ YES ☐ NO; HIGHEST LEVEL COMPLETED ☐ 9 ☐ 10 ☐ 11 ☐ 12; OR DID YOU RECEIVE A G.E.D.? ☐ YES ☐ NO										
		COLLEGE/UNIVER	RSITY EDU	JCATION	N					
COLLEGE, UNIVERSITY, BUSINESS OR TRADE	LOCATIO	OCATION OF SCHOOL		OR/MIN	NOR	LENGTH OF STUDY I YEARS AND/OR MONTHS		DITS EIVED	DEGREE OR CERTIFICATE	
SCHOOLS ATTENDED			<u> </u>			Sem Hr		Qtr Hrs	EARNED	
		-								
GIVE AND/OR LIST ANY ADDITIONAL INFORMATION/EXPLANATION SUCH AS, SPECIAL TRAINING, LICENSES, CERTIFICATES, WORK AND/OR EQUIPMENT SKILLS, LANGUAGES, OR OTHER SPECIAL SKILLS YOU MAY HAVE THAT ARE PERTINENT TO THE POSITION TO WHICH YOU ARE APPLYING:										
LIST THE NAMES OF THREE PERSONS, OTHER THAN FORMER EMPLOYERS OR RELATIVES , HAVING KNOWLEDGE OF YOUR CHARACTER, EXPERIENCE OR ABILITIES.										
NAME ADDRESS		SS	3		BUSINESS			TELEPHONE		
SOME POSITIONS MAY REQUIRE OR GIVE PREFERENCE FOR SPECIFIC SKILLS AND MAY REQUIRE A PRE-EMPLOYMENT TEST (SEE JOB CLASSIFICATION/ANNOUNCEMENT). TYPING SPEED WPM										
WHAT DIFFERENT SOFTWARE	PROGRAMS A	RE YOU FAMILIAR \	WITH? W	/HAT O	THER O	FFICE MACHIN	ES CAN	YOU C)PERATE?	
ARE YOU A VETERAN OF THE ARE YOU A DISABLED VETE	ERAN OF THE	U.S. ARMED FOR	RCES?							

EMPLOYMENT RECORD

BEGINNING WITH THE MOST RECENT, LIST JOBS HELD IN THE LAST TEN YEARS. Include any other experience related to the position for which you are applying and any volunteer work. If additional space is needed, attach a page with information in the same format. You may also attach a résumé.

NAME AND ADDRESS OF EMPLOYER	DATES EMPLOYED ((MO./YR.)	NAME AND TITLE OF SUPERVISOR				
	FROM	☐ PART-TIME					
		OR	PHONE: ()				
	ТО	☐ FULL-TIME	May we contact? ☐ YES ☐ NO				
POSITION YOU HELD: (DESCRIBE IN DETA	L BELOW THE WORK YOU	J PERFORMED, EQUIPME	ENT YOU OPERATED, AND SKILLS YOU USED)				
`		•	,				
NAME AND ADDRESS OF EMPLOYER	DATES EMPLOYED ((MO./YR.)	NAME AND TITLE OF SUPERVISOR				
	FROM	PART-TIME					
	11.0	OR OR	PHONE: ()				
	то	☐ FULL-TIME	May we contact? ☐ YES ☐ NO				
DOCITION VOLUME D. (DECORIDE IN DETA	DELOW THE WORK YOL		-				
POSITION YOU HELD: (DESCRIBE IN DETA	L BELOW THE WORK YOU) PERFORMED, EQUIPME	ENT YOU OPERATED, AND SKILLS YOU USED)				
NAME AND ADDRESS OF EMPLOYER	DATEC EMPLOYED	(MO MD)	NAME AND TITLE OF CUREDVICOR				
NAME AND ADDRESS OF EMPLOYER	DATES EMPLOYED (<u>`</u>	NAME AND TITLE OF SUPERVISOR				
	FROM	☐ PART-TIME					
	то	OR	PHONE: ()				
	10	☐ FULL-TIME	May we contact? ☐ YES ☐ NO				
NAME AND ADDRESS OF EMPLOYER	DATES EMPLOYED (MC	O./YR.)	NAME AND TITLE OF SUPERVISOR				
	FROM	☐ PART-TIME					
		OR	PHONE: ()				
	ТО	☐ FULL-TIME	May we contact? ☐ YES ☐ NO				
POSITION YOU HELD: (DESCRIBE IN DETA	IL BELOW THE WORK YOU	J PERFORMED, EQUIPMI	ENT YOU OPERATED, AND SKILLS YOU USED)				
_							
HOW DID YOU HEAR ABOUT THIS POSIT	ION? Linn County	\A/ 1 ''					
☐ Other		y vvebsite ⊔	Employment Office				
		y vvebsite	Employment Office				
on County is an Equal Opportunity - Affirma							
	tive Action Employer, dec	dicated to a policy of no	n-discrimination in employment on the basis of				
ce, color, religion, sex, national origin, age, ree of this application does not indicate that	tive Action Employer, dec marital, disability, veteran at there are any positior	dicated to a policy of no , or status within any ot ns open and does not	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me				
ce, color, religion, sex, national origin, age, ree of this application does not indicate that apployment. I understand that an offer of employment.	tive Action Employer, dec marital, disability, veteran at there are any positior ployment is subject to (1)	dicated to a policy of no , or status within any ot ns open and does not my providing proof of w	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law;				
ce, color, religion, sex, national origin, age, in e of this application does not indicate the apployment. I understand that an offer of employment of the Colombia (2) my completion, satisfactory to the Colombia (2) my completion, satisfactory to the Colombia (2) my completion, satisfactory to the Colombia (3) my completion, satisfactory to the Colombia (4) my completion, satisfactory to the Colombia (4) my completion, satisfactory to the Colombia (4) my completion (4) my colombia (4) my c	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre-	dicated to a policy of no , or status within any ot ns open and does not my providing proof of w employment tests, phys	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law; sical examinations and procedures the County				
ce, color, religion, sex, national origin, age, in element of this application does not indicate the apployment. I understand that an offer of empty of the Color	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac	dicated to a policy of no , or status within any ot ns open and does not my providing proof of w employment tests, physits called for in this app	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law; sical examinations and procedures the County				
ce, color, religion, sex, national origin, age, region of this application does not indicate the apployment. I understand that an offer of empty of (2) my completion, satisfactory to the Cocides to use. I understand that misrepreser d/or dismissal from employment. I under apployment will be "at will" and may be terminated.	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit	dicated to a policy of no, or status within any ot as open and does not my providing proof of wemployment tests, physits called for in this app during the probation ph or without cause or	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the				
ce, color, religion, sex, national origin, age, re of this application does not indicate the apployment. I understand that an offer of empty of (2) my completion, satisfactory to the Cocides to use. I understand that misrepreser d/or dismissal from employment. I under apployment will be "at will" and may be terpormation contained in this paragraph; (2)	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit I authorize LINN COUN	dicated to a policy of no , or status within any ot ns open and does not my providing proof of w employment tests, physits called for in this app during the probation p h or without cause or TY to make investigation	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the lons to verify the information contained in this				
ce, color, religion, sex, national origin, age, re of this application does not indicate the apployment. I understand that an offer of empty of (2) my completion, satisfactory to the Cocides to use. I understand that misrepreser d/or dismissal from employment. I under apployment will be "at will" and may be terformation contained in this paragraph; (2) plication and resume (if provided); and (3) I	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit I authorize LINN COUN' acknowledge receipt of t	dicated to a policy of no, or status within any ot as open and does not my providing proof of wemployment tests, physits called for in this app during the probation ph or without cause or TY to make investigation policable job classi	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me ork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the lons to verify the information contained in this fication and job announcement. I hereby certify				
ce, color, religion, sex, national origin, age, is of this application does not indicate the aployment. I understand that an offer of empty of the Color of the c	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit I authorize LINN COUN' acknowledge receipt of t tations or falsifications a	dicated to a policy of no, or status within any ot as open and does not my providing proof of wemployment tests, physics called for in this app during the probation ph or without cause or TY to make investigation that the information	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me tork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the lons to verify the information contained in this				
ce, color, religion, sex, national origin, age, re of this application does not indicate the apployment. I understand that an offer of empty of the Color of the	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit I authorize LINN COUN' acknowledge receipt of t tations or falsifications a	dicated to a policy of no, or status within any ot as open and does not my providing proof of wemployment tests, physics called for in this app during the probation ph or without cause or TY to make investigation that the information	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me tork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the lons to verify the information contained in this fication and job announcement. I hereby certify given is true and complete to the best of my				
ce, color, religion, sex, national origin, age, is of this application does not indicate the apployment. I understand that an offer of empty of (2) my completion, satisfactory to the Colorides to use. I understand that misrepresent door dismissal from employment. I under apployment will be "at will" and may be tenformation contained in this paragraph; (2) oplication and resume (if provided); and (3) I at this application contains no misrepresen	tive Action Employer, dec marital, disability, veteran at there are any position ployment is subject to (1) bunty, of any and all pre- ntation or omission of fac stand that if employed, minated at any time, wit I authorize LINN COUN' acknowledge receipt of t tations or falsifications a	dicated to a policy of no, or status within any ot as open and does not my providing proof of wemployment tests, physics called for in this app during the probation ph or without cause or TY to make investigation that the information	n-discrimination in employment on the basis of her legal protected group. I understand that my in any way obligate the County to offer me tork eligibility, as required by United States law; sical examinations and procedures the County lication is cause for rejection of the application period applicable to the position offered, my notice. By my signature, (1) I understand the lons to verify the information contained in this fication and job announcement. I hereby certify given is true and complete to the best of my				

Please refer to the Job Announcement posted on the Linn County webpage at http://www.co.linn.or.us/jobs to obtain information regarding where to submit your completed application. If you do not have access to a computer or if you have any questions, feel free to call 541-967-3825.