

CLACKAMAS COUNTY - APPLICATION FOR TEMPORARY EMPLOYMENT

PLEASE PRINT IN INK

Current Date: _____

Date Available For Work: _____

POSITION(S) APPLIED FOR: _____

Name: _____
Last First MI

Address: _____
and Street City State Zip

Home Phone: _____ Daytime or Message Phone: _____

Are You 18 Years Of Age Or Over? Yes No

WORK EXPERIENCE: Please list prior experience (paid or volunteer). Start with the most recent employment.

Employer	Address	From: Mo/Yr	To: Mo/Yr
Title	Hours per week	Supervisor	Phone

Duties (include equipment Operated): _____

Reason for Leaving: _____

Employer	Address	From: Mo/Yr	To: Mo/Yr
Title	Hours per week	Supervisor	Phone

Duties (include equipment Operated): _____

Reason for Leaving: _____

Employer	Address	From: Mo/Yr	To: Mo/Yr
Title	Hours per week	Supervisor	Phone

Duties (include equipment Operated): _____

Reason for Leaving: _____

APPLICATION CONTINUED ON OTHER SIDE

EDUCATION:

Highest Grade Completed

1 2 3 4 5 6 7 8

Grade School

9 10 11 12

High School

13 14 15 16

17 18

19 20 21 22

College/Graduate School

High School

Attended:

Name

Location

College/Vocational
Schools Attended:

Name

Location

Major: _____

To the best of your knowledge, are you able to perform the duties of the position for which you are applying, with or without reasonable accommodation?

Yes No **REFERENCES:**

1.	_____	_____	_____
	Name	Address	Phone
2.	_____	_____	_____
	Name	Address	Phone

My signature affirms that I release from liability any employer, person, or employee supplying reference information regarding me and my previous employment. I also release Clackamas County from all liability which may result from making any investigation of information provided in the application materials. All information on this application is true to the best of my knowledge. I understand that falsification or misrepresentation may result in disqualification from employment consideration.

Applicant Signature

Date

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER**FOR OFFICE USE ONLY**Eligible Ineligible Date Interviewed: _____

Notice of Results Sent: _____

Date Started: _____ Classification: _____

Range: _____ Step: _____ Hourly Rate: _____

Division/Section Assigned: _____