



City of Coburg
 PO BOX 8316 / COBURG / OREGON / 97408
 PHONE (541) 682-7850
 coburgoregon.org

NAME:

APPLICATION FOR EMPLOYMENT

PLEASE TYPE OR PRINT IN INK.

PERSONAL DATA

- A. Name: Last: _____ First: _____ Middle: _____
- B. Mailing Address: _____ Apartment: _____
 City: _____ State: _____ Zip: _____
- C. Home: (_____) _____ Cell: (_____) _____ Email: _____
- D. How did you learn of the position? Newspaper TV Internet Other
 Other (Please Specify) _____

EDUCATION

	NAME	CITY/STATE	Choose Highest Year Completed	Did you Graduate?		DEGREE/MAJOR
				Yes	No	
HIGH SCHOOL				<input type="checkbox"/>	<input type="checkbox"/>	N/A
COLLEGE				<input type="checkbox"/>	<input type="checkbox"/>	
TECHNICAL				<input type="checkbox"/>	<input type="checkbox"/>	
OTHER				<input type="checkbox"/>	<input type="checkbox"/>	

POSITION:

EMPLOYMENT DATA

Position applying for: _____

List any other pertinent experience, skills, training or volunteer experience that you have which are related to the position for which you are applying:

DATE:

EMPLOYMENT EXPERIENCE list your current or most recent position first. Complete this section even if you provide a resume. Attach additional sheets if necessary

Are you presently employed? Yes No May we contact you at work? Yes No

Present or Most Recent Employer Name: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor's Name & Title: _____

Reason for Leaving: _____

My current employer.... may may not be contacted without prior applicant consent.

Next Most Recent Employer: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor's Name & Title: _____

Describe assigned duties:

Reason for Leaving: _____

Next Most Recent Employer: _____

Address: _____ Phone: _____

Job Title: _____ Supervisor's Name & Title: _____

Job Duties (please describe):

Reason for Leaving: _____

REFERENCES

List three (3) Professional References

NAME	ADDRESS	PHONE NO.
1.		
2.		
3.		

CERTIFICATION OF APPLICANT by signing my name below, I hereby certify that the information on this application is true and complete. I understand that falsifications, misrepresentations, and material omission could be cause for my dismissal. I hereby authorize the City of Coburg to contact my references and past employers and receive from them any information about me regarding my job performance, knowledge, and skills. I hereby release the City of Coburg and those contacted for references from any liability of damage which may result from the information.

Signature: _____ Date: _____

Veterans' Preference

Name: _____

The following questions are voluntary questions, however, if you are interested in consideration as a veteran, under Oregon's veterans' preference hiring law, we need to know if you qualify. More information about this law, is available by going to BOLI's FAQ: http://www.oregon.gov/boli/TA/t_faq_veterans_preference_2012.aspx

For purposes of veterans' preference hiring, a veteran is defined as: a person who served on active duty with the U.S. armed forces for more than 90 consecutive days beginning on or before January 31, 1955 or for more than 178 consecutive days thereafter, and who was discharged or released from such service under honorable conditions. Also included are veterans who served 178 days or less, but were discharged or released under honorable conditions because of a service-connected disability (or who have a disability rating from VA), or who served at least one day in a combat zone and were discharged or released under honorable conditions. Finally, the veterans' preference law applies to veterans who received combat or campaign ribbon or expeditionary medal for service in the U.S. armed forces, and were discharged or released under honorable conditions.

I meet this definition of a veteran and I am asking for veterans' preference consideration:

Yes No

For purposes of veterans' preference hiring, a disabled veteran is a person who has a disability rating through the U.S. Department of Veterans Affairs, one whose discharge or release was for a disability incurred or aggravated in the line of duty, or a recipient of the Purple Heart for wounds received in combat.

I meet this definition of a Disable Veteran and I am asking for veterans' preference consideration:

Yes No

If you meet the qualifications for Veterans' Preference consideration, and if you want the City to take this into consideration as a part of the recruitment process your **response must be supported by submission of form DD-214 or 215.**



APPLICANT DATA RECORD

The City of Coburg is an equal opportunity employer.

Applicants are considered for employment without regard to race, color, religion, sex, national origin, age, sexual orientation, marital or veteran status, medical condition or disabilities, or any other legally protected status.

To help us comply with government record keeping, and to evaluate effectiveness of our efforts, we request that you fill out the "Applicant Data Record". This data will be kept in confidential file separate from your application for employment. **YOUR COOPERATION IS VOLUNTARY.**

Position you are applying: _____

Full Name: _____ Date of Application: _____

Please check where applicable:

Female

Veteran

Latino/Hispanic

Male

African American/Black

Native American/Alaskan Native

Under 21

Asian/Pacific Islander

Over 40

Caucasian/White