## CITY OF WOODBURN APPLICATION OF EMPLOYMENT

Select all departments from which	you are seeking employment:
Police Department	City Hall
Utility Department	Other If Other, describe
	Applicant Information
Full Name:	Cell:
Physical Address:	
(If different)	
E-mail:	
Are you a citizen of the United Sta If no, are you authorized to work	
Have you ever worked for this could you cease employ	
Have you ever been convicted of	crime? YES NO
If yes, explain:	
Current Employer (Fill out as m	Current/Previous Employment ny employment descriptions as you feel are necessary)
Name of Company:	
Company Address:	May we contact your
Supervisor's Name:	supervisor for a reference?
Supervisor's Phone:	YES NO
Job Title:	
Responsibilities:	
Starting Salary:	
Ending Salary:	, <del></del>
Start Date:	
End Date:	
Reason for Leaving:	

## Past Employer

Name of Company: Company Address: Supervisor's Name: Supervisor's Phone:  Job Title: Responsibilities: Starting Salary: Ending Salary:	May we contact your supervisor for a reference? YES NO
Start Date: End Date: Reason for Leaving:	
Past Employer	
Name of Company: Company Address: Supervisor's Name: Supervisor's Phone:	May we contact your supervisor for a reference? YES NO
Job Title: Responsibilities: Starting Salary: Ending Salary:	
Start Date: End Date: Reason for Leaving:	
Past Employer	
Name of Company: Company Address: Supervisor's Name: Supervisor's Phone:	May we contact your supervisor for a reference? YES NO
Job Title: Responsibilities: Starting Salary: Ending Salary:	
Start Date: End Date: Reason for Leaving:	

Full Name:		
Nature of Relationship:		
Phone Number:		
Mailing Address:		
Years Known:		
Full Name:		
Nature of Relationship:		
Phone Number:		
Mailing Address:		
Years Known:		
Full Name:		
Nature of Relationship:		
Phone Number:		
Mailing Address:		
Years Known:		
	Employment Questions	
Desired position:		
Desired salary:		
Desired start date:		
Is there anything else tha	at you wish to share before having an interview?	
	Disclaimer and Signature	
Lundarstand that by sime	ply submitting this application, the City of Woodburn	
	interview or hire said individual described within, and	
· ·	ormation obtained will be used soley for that purpose.	
,, ,, ,, ,,		
By signing below, I certify	y that all information provided is accurate and true to	
	e. I also understand that intentionally falsifying this	
document may result in i	mmediate dismissal of my position after discovery.	
Signature:		
Date Signed:		
	Office Use Only	
Received By:	Date Received:	

Personal/Professional References