

CITY OF MOSES LAKE  
P. O. Box 1579 (321 S. Balsam)  
Moses Lake, WA 98837

APPLICATION FOR EMPLOYMENT  
AN EQUAL OPPORTUNITY EMPLOYER

All statements made by applicants for employment on this application form will be checked for accuracy. We offer equal employment opportunities to all persons without regard to race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status. If you believe you have been discriminated against, you should contact the city's Human Resources Department immediately.

**IMPORTANT:** Application must be signed in all designated places and notarized. Failure to comply with these instructions will cause application to be rejected.

Position(s) applied for \_\_\_\_\_ Date \_\_\_\_\_

Type of employment \_\_\_\_\_ Full Time \_\_\_\_\_ Part Time \_\_\_\_\_ Temporary

What days and hours if part time? Days \_\_\_\_\_ Hours \_\_\_\_\_

Can you meet the attendance requirements for regular work shifts with or without accommodations? \_\_\_ Yes \_\_\_ No

If required can you work: \_\_\_\_\_ Overtime? \_\_\_\_\_ Irregular hours? \_\_\_\_\_ Irregular work week? \_\_\_\_\_ Weekends?

PERSONAL INFORMATION

Name \_\_\_\_\_ Phone \_\_\_\_\_  
Last First Middle

Present Address \_\_\_\_\_  
No. Street City State Zip

Previous Address \_\_\_\_\_ Social Security Number \_\_\_\_\_

Are you over the age of 18? \_\_\_ Yes \_\_\_ No Do you have the legal right to work in the U. S.? \_\_\_ Yes \_\_\_ No

REFERENCES

(Do not list relatives or former employers)

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone # \_\_\_\_\_

Have you ever served in the U.S. Armed Forces? \_\_\_\_ Yes \_\_\_\_ No If yes, branch \_\_\_\_\_

Date Entered \_\_\_\_\_ Date Discharged \_\_\_\_\_

Have you ever been convicted of a crime except a minor traffic violation? \_\_\_\_ Yes \_\_\_\_ No If so, state citation, date, court, and place where offense occurred. \_\_\_\_\_

Have you ever been discharged/requested to resign from a position? \_\_\_\_ Yes \_\_\_\_ No If yes, give circumstances \_\_\_\_\_

Are you employed now? \_\_\_\_ Yes \_\_\_\_ No

Why do you desire to make a change? \_\_\_\_\_

Have you ever held a position of trust (handling money or confidential material?) \_\_\_\_ Yes \_\_\_\_ No

| PRIOR WORK RECORD (Start with most recent or present employer and complete in full.) |                                      |                   |               |
|--|--------------------------------------|-------------------|---------------|
| 1.   | Name and Address of Employer         | Telephone Number  |               |
|  | Supervisor (Name and Position)       | Your Date of Hire | Starting Rate |
|  | Job Title & Duties                   | Date Left         | Last Rate     |
|  | Reason for Leaving:                  |                   |               |
|  | May we contact this employer? Yes No |                   |               |
| 2.   | Name and Address of Employer         | Telephone Number  |               |
|  | Supervisor (Name and Position)       | Your Date of Hire | Starting Rate |
|  | Job Title & Duties                   | Date Left         | Last Rate     |
|  | Reason for Leaving:                  |                   |               |
|  | May we contact this employer? Yes No |                   |               |
| 3.   | Name and Address of Employer         | Telephone Number  |               |
|  | Supervisor (Name and Position)       | Your Date of Hire | Starting Rate |
|  | Job Title & Duties                   | Date Left         | Last Rate     |
|  | Reason for Leaving:                  |                   |               |
|  | May we contact this employer? Yes No |                   |               |

Please provide any additional information such as special skills, training, management experience, equipment operation, or qualifications you feel will be helpful to us in considering your application. \_\_\_\_\_

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**EDUCATION**

| Type of School | Name and Address of School | Courses Majored In | Circle Last Year Completed | Graduate? Give Degrees |
|----------------|----------------------------|--------------------|----------------------------|------------------------|
| Elementary     |                            |                    | 5 6 7 8                    |                        |
| High School    |                            |                    | 9 10 11 12                 |                        |
| College        |                            |                    | 1 2 3 4                    |                        |
| Other          |                            |                    |                            |                        |

Have you applied for a job with us before? \_\_\_\_ Yes \_\_\_\_ No Have you ever worked for us before \_\_\_\_ Yes \_\_\_\_ No

Have you ever been bonded? \_\_\_\_ Yes \_\_\_\_ No Have you ever been refused a bond? \_\_\_\_ Yes \_\_\_\_ No

If so, state reason and date. \_\_\_\_\_

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**JOB APPLICANTS AGREEMENT AND CERTIFICATION**

I certify that the information given by me in this application is true in all respects, and I agree that if the information given is found to be false in any way, it shall be considered sufficient cause for denial of employment or discharge. I authorize the use of any information in this application to verify my statements, and I authorize the past employers, all references, and any other persons to answer all questions asked concerning my ability, character, reputation, and previous employment record. I release all such persons from any liability or damages on account of having furnished such information.

\_\_\_\_\_  
Applicant's Signature

I understand that nothing contained in this employment application or in the granting of an interview is intended to create an employment contract between the City of Moses Lake and myself for either employment or for the providing of any benefit. No promises regarding employment have been made to me, and I understand that no such promise of guarantee is binding upon the City of Moses Lake unless made in writing. If an employment relationship is established, I understand that I have the right to terminate my employment at any time and that the City of Moses Lake retains the same right. I understand that if employed, policies and rules which are issued are not conditions of employment and that the employer may revise policies or procedures, in whole or in part, at any time.

\_\_\_\_\_  
Applicant's Signature

I understand that prior to being offered employment with the City of Moses Lake I may be requested to take an employment examination. In the event I have a disability which will affect my ability to take the test, I will so inform the City of Moses Lake prior to the administration of the test so that a reasonable accommodation can be made. Requested accommodations may include accessible testing sites, modified testing conditions, and accessible testing formats. The City of Moses Lake reserves the right to require medical documentation concerning the need for the accommodation.

\_\_\_\_\_  
Applicant's Signature

I understand that a key part of the job I am seeking may be the requirement to drive a city-owned vehicle. I hereby authorize the Moses Police Department and/or the Washington State Patrol to check my driving record and to release that information to the personnel or other investigating department.\*

\_\_\_\_\_  
Applicant's Signature

I understand that as part of the selection process I may be required to go through a series of examinations, including but not limited to polygraph, medical, physical, psychological, and pre-employment drug screen. I hereby authorize the administrators of such examinations to release to the Personnel Department any and all information developed.

\_\_\_\_\_  
Applicant's Signature

Some positions with the city require contact with children or other persons identified in RCW 43.43. The identification of such positions will be made known at the time of hiring. If the position is so identified, I authorize the Moses Lake Police Department and/or the Washington State Patrol to conduct a background investigation in accordance with state law.\*

\_\_\_\_\_  
Applicant's Signature

State of \_\_\_\_\_

County of \_\_\_\_\_

I certify that I know or have satisfactory evidence that \_\_\_\_\_ signed this instrument and acknowledged it to be his/her free and voluntary act for the uses and purposes mentioned in the instrument.

Dated \_\_\_\_\_

\_\_\_\_\_  
Notary Public  
My appointment expires \_\_\_\_\_

\*If the Moses Lake Police Department is requested to provide information, it is authorized to release such information to the Personnel Office.

**NOTE: IN ACCORDANCE WITH FEDERAL LAW, IF HIRED, YOU WILL BE REQUIRED TO FURNISH DOCUMENTARY PROOF OF WORK AUTHORIZATION AND IDENTITY WITHIN 24 HOURS OF EMPLOYMENT. ATTESTATION FORMS WILL BE PROVIDED BY THE CITY AND DESIGNATED DOCUMENTS WILL BE IDENTIFIED PRIOR TO HIRING.**