



APPLICATION FOR EMPLOYMENT

CITY OF BREMERTON
345 Sixth St., Suite 600
Bremerton, WA 98337-1873
Phone: (360) 473-5846
Fax: (360) 473-2333

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, sexual orientation, age, marital or veteran status, or the presence of any disability.

Instructions: Please print or type all information. This application **must** be filled out accurately and completely. Do not leave an item blank. If an item does not apply, write N/A (not applicable). **Incomplete applications will be reason for disqualification from further consideration.** If you need additional space to answer a question fully, you may use full sheets of paper that are the same size as this page. On each additional page, include your name and the position title for which you are applying. If you are submitting a resume, you must still complete all parts of this application. You may attach copies of documents or certificates which support your application. All materials submitted become the property of the City and will not be returned. All statements made on this application are subject to verification. A separate application must be completed for each position for which you apply.

How did you learn about us?

Advertisement Publication _____ Employment Agency Friend/Relative Job Line Walk-In Other _____

Position Applied For: _____ **Date of Application:** _____

Name _____
LAST FIRST MIDDLE (MAIDEN)

Mailing Address _____
NUMBER STREET CITY STATE ZIP CODE

Telephone () _____ Work Telephone () _____

Message Telephone () _____ Name of Contact _____

Email Address (Required). _____

Have you filed an application here before? Yes No If yes, give date _____

Have you ever been employed here before? Yes No If yes, give date _____

May we contact your present employer? Yes No

Can you demonstrate that you are legally authorized to work in the United States at time of job offer? Yes No

Police & Fire Only: U.S. Citizen Yes No

(Proof of work authorization and picture identity required upon employment for all positions)

On what date would you be available for work? _____

Are you available to work: Full Time Part Time Shift Work Temporary

Can you travel if a job requires it? Yes No

Have you been convicted of a felony within the last ten years? Yes No

Police Officer applicants only: Have you ever been convicted of a felony? Yes No

If yes, please explain _____

The City of Bremerton is Proud to be an Equal Employment Opportunity Employer Committed to a Diverse Workforce.

Employment Experience

Start with your present or last job. Include military service assignments and volunteer activities. This section **must** be completed. Do not put "refer to resume." If you need additional space, please continue on additional information page on reverse.

1	EMPLOYER		DATES EMPLOYED		Work Performed
			FROM	TO	
	ADDRESS				
	JOB TITLE		HOURLY STARTING	RATE/SALARY FINAL	
	SUPERVISOR	TELEPHONE NO.			
REASON FOR LEAVING					
2	EMPLOYER		DATES EMPLOYED		Work Performed
			FROM	TO	
	ADDRESS				
	JOB TITLE		HOURLY STARTING	RATE/SALARY FINAL	
	SUPERVISOR	TELEPHONE NO.			
REASON FOR LEAVING					
3	EMPLOYER		DATES EMPLOYED		Work Performed
			FROM	TO	
	ADDRESS				
	JOB TITLE		HOURLY STARTING	RATE/SALARY FINAL	
	SUPERVISOR	TELEPHONE NO.			
REASON FOR LEAVING					
4	EMPLOYER		DATES EMPLOYED		Work Performed
			FROM	TO	
	ADDRESS				
	JOB TITLE		HOURLY STARTING	RATE/SALARY FINAL	
	SUPERVISOR	TELEPHONE NO.			
REASON FOR LEAVING					
5	EMPLOYER		DATES EMPLOYED		Work Performed
			FROM	TO	
	ADDRESS				
	JOB TITLE		HOURLY STARTING	RATE/SALARY FINAL	
	SUPERVISOR	TELEPHONE NO.			
REASON FOR LEAVING					

Complete if required for the position for which you are applying:

Typing Speed _____

List Word Processing Software Knowledge: _____

List Names of Data Processing Equipment you have used: _____

Certifications, Special Skills and/or Qualifications:

List and/or summarize _____

Education

	Elementary	High School	College/University	Graduate/Professional
School Name				
Year Graduated				
Years Completed	4 5 6 7 8	9 10 11 12	1 2 3 4	1 2 3 4
Check Appropriate Box	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Diploma/Degree				
Describe Course of Study				
Describe Specialized Training, Apprenticeship, Skills				

Honors Received:

State any additional information you feel may be helpful to us in considering your application.

Extra-Curricular Activities

References:

Give name, address and telephone number of three references who are not related to you and are not previous employers:
