CITY OF ONTARIO EMPLOYMENT APPLICATION

POSITION TITLE:	
RECRUITMENT OPEN DATE:	RECRUITMENT CLOSED DATE:

DATE/TIME APPLICATION RECEIVED: _____ BY: _____

The City of Ontario provides employment opportunity to all qualified employees and applicants, without unlawful regard to race, color, religion, gender, sexual orientation, national origin, age, disability, genetic information, veteran's status, or any other status protected by applicable federal, Oregon, or local law. Our EEO policy applies to all aspects of the employment relationship-including, but not limited to, recruitment, hiring, compensation, promotion, demotion, transfer, disciplinary action, layoff, recall, and termination of employment.

To claim veteran's preference in hiring, please complete the Veteran's Preference Form and submit it with the required documentation, at the time you submit this application.

Your application may be considered incomplete, if you do not answer all of the questions, submit any required supplemental documentation, and sign your application.

How did you learn about this job opening? _____

PERSONAL INFORMATION

First Name	MI	Last Name	
Address	City	State	Zip Code
Phone	Cell Phone	Email	

EDUCATION

What is your highest level of education?

☐ High School Diploma/GED ☐ Some College ☐ Bachelor's Degree ☐ Doctorate

☐ Technical College ☐ Associate's Degree ☐ Master's Degree

COLLEGE/UNIVERSITY EDUCATION

School Name	Degree Received	
School Location (City/State)	Major	
Did you graduate? Yes ☐ No ☐	If no, # of units completed:	Semester ☐ Quarter ☐

School Name	Degree Received	
School Location (City/State)	Major	
Did you graduate? Yes ☐ No ☐	If no, # of units completed:	Semester ☐ Quarter ☐

School Name	Degree Received	
School Location (City/State)	Major	
Did you graduate? Yes ☐ No ☐	If no, # of units completed:	Semester ☐ Quarter ☐

PROFESSIONAL CERTIFICATES & LICENSES		
Type	Date Issued (MM/YYYY)	Expiration Date (MM/YYYY)
License Number	Issuing Agency	

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Please list your current or most recent job first; then go backwards, for up to 10 years of employment. Use as many blocks as needed for your work history. If more blocks are needed, please provide an attachment. If you have volunteer work, or other unpaid work that is directly relevant to the position you are applying for, you are welcome to include that information. Please do not substitute "See Resume".

WORK HISTORY #1					
Start Date	End Date	Employer		Position Title	
Address		City	State		Zip
Company Website	Phone Number		Supervisor (Name & Title)		
Hours worked per week	May we contact this employer?	Yes ☐	No ☐		
Duties:					
Reason for leaving:					

WORK HISTORY #2					
Start Date	End Date	Employer		Position Title	
Address		City	State		Zip
Company Website	Phone Number		Supervisor (Name & Title)		
Hours worked per week	May we contact this employer?	Yes ☐	No ☐		
Duties:					
Reason for leaving:					

WORK HISTORY #3

Start Date	End Date	Employer	Position Title

Address	City	State	Zip

Company Website	Phone Number	Supervisor (Name & Title)

Hours worked per week	May we contact this employer?	Yes ☐ No ☐

Duties:

Reason for leaving:

WORK HISTORY #4

Start Date	End Date	Employer	Position Title

Address	City	State	Zip

Company Website	Phone Number	Supervisor (Name & Title)

Hours worked per week	May we contact this employer?	Yes ☐ No ☐

Duties:

Reason for leaving:

WORK HISTORY #5

Start Date	End Date	Employer	Position Title

Address	City	State	Zip

Company Website	Phone Number	Supervisor (Name & Title)

Hours worked per week	May we contact this employer?	Yes ☐ No ☐

Duties:

Reason for leaving:

OFFICE SKILLS

Office Skills:

Computer Skills - Windows Programs		
Microsoft Word	☐ No Experience ☐ Beginner (Typing letters/memos) ☐ Intermediate (Mail merge, tables, forms) ☐ Advanced (Styles, graphics, publications)	Explain how you gained your experience.
Microsoft Excel	☐ No Experience ☐ Beginner (Data entry, sorting) ☐ Intermediate (Formulas, charts/graphics) ☐ Advanced (Linked sheets/import data)	Explain how you gained your experience.
Microsoft PowerPoint	☐ No Experience ☐ Beginner ☐ Intermediate ☐ Advanced	Explain how you gained your experience.
Other:	☐ No Experience ☐ Beginner ☐ Intermediate ☐ Advanced	Explain how you gained your experience.

Do you have any special skills, qualifications, or licenses not already mentioned, which may be useful in the position for which you are applying?

LANGUAGE PROFICIENCY (OTHER THAN ENGLISH)

Language:	☐ Speak	☐ Read	☐ Write
Language:	☐ Speak	☐ Read	☐ Write
Language:	☐ Speak	☐ Read	☐ Write

SUPPLEMENTAL QUESTIONS

1. Date you are available to start:

2. Are you willing and able to travel occasionally? ☐ Yes ☐ No

3. Please describe how you improve your skills related to this position.

4. Which of the following best describes your years of experience related to this position?

- ☐ No experience
- ☐ Less than 1 year
- ☐ 1 to 2 years
- ☐ 3 to 5 years
- ☐ 6 to 9 years
- ☐ 10 to 14 years
- ☐ 15+ years

5. Based on your answer to #4, give us examples of training, classes or education that helped you improve your skills related to this position.

6. Please describe why you want to work for the City of Ontario, in this job.

UNDERSTANDING AND ASSURANCES

Please read the following statements carefully and indicate your understanding and acceptance by signing in the space provided.

1. I understand that any misrepresentation or omission, as well as any misleading statements or omissions of application information, attachments, or supporting documents may result in denial of employment or if already hired, then termination. And, I understand that I may be required to verify any and all information submitted.
2. I understand that as a condition of employment, I will be required to provide legal proof of authorization to work in the U.S.
3. I understand that as allowed by law, policy, and/or [collective bargaining agreement], the City of Ontario may check my criminal background information, DMV information, references, education, certification, licenses, and/or any other source of information that might provide information about my suitability and qualifications for employment with the City of Ontario, I understand that as the recruitment progresses I may be required to provide additional information in order that a thorough background check can be completed.
4. As allowed by law, policy, and/or a [collective bargaining agreement] I agree to undergo any drug and/or alcohol testing that the City of Ontario may be required.
5. I certify that I have fully, accurately, and completely answered all questions, and have given all information requested in the application materials. I certify that I have not withheld any information relative to my application for employment. I understand that any wrong or incomplete information in my application materials may disqualify me for further consideration of employment, or, if discovered after I am hired, may be grounds for my dismissal.
6. I understand that all application-related information is subject to verification by the City of Ontario, and hereby give my consent to the City of Ontario to investigate my background and qualifications using any means, sources, and outside investigators at its disposal.
7. I understand that submission of this application does not necessarily mean that I will be hired. I understand and agree that, with the exception of employees subject to a collective bargaining agreement, if hired, my employment relationship with the City of Ontario will be "at-will". That means that either I or the City of Ontario may terminate this relationship at any time, for any reason, with or without cause or notice.
8. I authorize any of the persons or organizations referenced in this application, otherwise provided by me, otherwise provided by any person as developed through my employers and/or references, or otherwise provided by any other source, to give you any and all information concerning my previous employment, education, character, or any other information they might have, personal or otherwise, with regards to any of the subjects covered in my application materials. I release all such parties from all liability from any damages which may result from furnishing such information.

I understand that this completed application, and any other materials submitted, are the property of the City of Ontario and will not be returned. I understand that I must notify the City of Ontario of any changes to my contact information.

I have read and understand the above information.

X _____ _____

Applicant's Signature Date

AUTHORIZATION TO RELEASE INFORMATION

I understand that this document, signed by me, authorizes the City of Ontario and its representative, to investigate my background information, employment records, and any other records necessary to determine job-related qualifications for a position within the City of Ontario.

I hereby release all parties and persons from all liability and/or claims, now or in the future, arising from the furnishing of any information concerning my employment history, work performance, background information, character, education, training and any other employment investigation information, including good faith expressions of opinion, to the City of Ontario organization, or its representative, as requested.

I further agree not to sue the City of Ontario or any and all other persons providing information for my suitability to perform the job I have applied for, as a result of the furnishing of any information, including good faith expressions of opinion, to the City of Ontario.

I understand and agree that any information released to the City of Ontario is done so in strictest confidence and shall not be released to me, unless required by law to do so, even if I am rejected for employment.

Applicant's Name (Print)

Other Last Names Used

Applicant's Signature

Date

VETERANS' PREFERENCE FORM

Under Oregon law, veterans who meet minimum qualifications for a position may be eligible for preference. If you think you may qualify, please read the following checklist carefully. Check the box for each item that is appropriate. If you need further explanation or have special circumstances, please call [insert contact information].

This completed form and the required documentation must be submitted at the time you submit your application.

A. QUALIFIED VETERAN QUESTIONS: You may be eligible to claim veterans' preference if you check at least one of the boxes below, and provide proof of eligibility by submitting a copy of your DD-214 or 215.

ORS 408.225 (1)(f)

- ☐ I served on active duty with the Armed Forces of the United States for a period of more than 90 consecutive days beginning on or before January 31, 1955, and was discharged or released under honorable conditions; or
- ☐ I served on active duty with the Armed Forces of the United States for a period of more than 178 consecutive days beginning after January 31, 1955, and was discharged or released from active duty under honorable conditions; or
- ☐ I served on active duty with the Armed Forces of the United States for 178 days or less and was discharged or released from active duty under honorable conditions because of a service connected disability; or
- ☐ I served on active duty with the Armed Forces of the United States for 178 days or less and was discharged or released from active duty under honorable conditions and have a disability rating from the United States Department of Veterans Affairs; or
- ☐ I served on active duty with the Armed Forces of the United States for at least one day in a combat zone and was discharged or released from active duty under honorable conditions; or
- ☐ I received a combat or campaign ribbon or an expeditionary medal for service in the Armed Forces of the United States and was discharged or released from active duty under honorable conditions; or
- ☐ I am receiving a non-service connected - pension from the United States Department of Veterans Affairs.

"Active duty" does not include attendance at a school under military orders, except schooling incident to an active enlistment or a regular tour of duty, or normal military training as a reserve officer or member of an organized reserve or a National Guard unit.

B. QUALIFIED DISABLED VETERAN QUESTIONS: You may claim additional employment preference if you can check at least one box in the section below and provide proof of eligibility by submitting both of the following documents:

1. A copy of your DD-214 or 215, Certificate of Release or Discharge, Copy 4, and
2. A public employment preference letter from the United States Department of Veterans Affairs. To order the letter, call 1-800-827- 1000 and request a public employment preference letter.

ORS 408.225 (1) (c)

- ☐ I have a disability rating designated by the United States Department of Veterans Affairs; or
- ☐ I was discharged or released from active duty for a disability incurred or aggravated in the line of duty; or
- ☐ I was awarded the Purple Heart for wounds received in combat.

I hereby claim veteran's preference and certify that the above information is true and correct. I understand that any false statements may be cause for my disqualification or dismissal, regardless of when discovered.

Applicant's Name	Signature	Date

Preference may not be awarded without the appropriate documentation. You must submit your DD-214 or 215 in all cases. If you are claiming disabled veteran preference you must also submit the public employment preference letter from the Department of Veterans Affairs. You will not receive preference without these accompanying documents.

RESIDENCY PREFERENCE FORM

Under Oregon law, ORS 284.797 Civil Service positions (Public Employee) Applicants whose residence in Malheur County, who meet minimum qualifications for a position may be eligible for preference.

Any person applying for a Civil Service position that meets the requirements of ORS 284.797 that applies for the preference at the time of applying for the position shall have five percentage points added to their final score.
If you think you may qualify, and would like to be considered for this preference, please read the following checklist carefully. Check the box for each item.

If you need further explanation please refer to the rules under ORS 284.797 (oregonlegislature.gov/bills_laws/ors/ors284.html) or have special circumstances, please call the Ontario HR Department at (541) 881-3248.

This completed form and the required documentation must be submitted at the time you submit your application.

A. QUALIFIED MALHUER COUNTY RESIDENT QUESTIONS: You may be eligible to claim residency preference if you check the boxes below and provide proof of eligibility by submitting proof of a residency with your name on it such as driver's license, utility bill or county assessor's information. Or certify that if hired you will reside in Malheur County.
ORS 284.797

☐ I certify that I am a resident of Malheur County at the time of application for a civil service position.

☐ I have submitted copies of proof of residency in Malheur County.

☐ I certify and understand that if I am appointed to a civil service position under this section that I **must** maintain residency in Malheur County for at l**east five consecutive years** following the date on which the employment begins. Failure to maintain residency in Malheur County for this period shall be considered a voluntary termination of the employment. No waver of this requirement can be given.

I hereby claim residence preference and certify that the above information is true and correct. I understand that any false statements may be cause for my disqualification or dismissal, regardless of when discovered. And I understand requesting this preference I must maintain my Malheur County residency for at l**east five consecutive years.**

Applicant's Name	Signature	Date

Preference may not be awarded without the appropriate documentation. You will not receive preference without these accompanying documents for proof of residency.

ONTARIO EMERGENCY RESPONSE REQUIREMENT

For the protection of the Citizens of Ontario, as well as the safety of other city personnel that depend on emergency response personnel for the performance of their duty the City has established an emergency response policy.

Any person applying for a Civil Service position that is deemed to be an Emergency Response personnel position established by the City Manager under an Executive Order, currently being EO-2026-101 and live within the Emergency Response Area designated as the States of Oregon and Idaho.

The Emergency Responders are designated as **Police and Fire personne**l, that are required to respond to emergency calls (all except for a few office personnel), Department Heads assigned to the Emergency Management Team and contract Public Works employees assigned by Jacobs to be on emergency calls.

The Department Heads assigned to the Emergency Management Team are defined as Police Chief, Fire Chief, Public Works Director, Community Development Director/Planning Director, City Recorder, Human Resource Manager, Finance Director, and Airport Manager and any other Department Head established by the City Manager.

If you are unsure of the position you are applying for please contact the HR Department and they can help you determine this before submitting your application (Not after).

If you think you may qualify, and would like to be considered for the position, please read the following checklist carefully. Check the box that applies to your status.

If you need further explanation, please call the Ontario Human Resource (HR) Department at (541) 881-3248.

This completed form and the required documentation (proof of address) must be submitted at the time you submit your application.

A. EMERGENCY RESPONSE PERSONNEL QUESTIONS: For your application to be considered for hiring one of the following boxes must be checked and certified to.

☐ I certify that I currently live inside of the established emergency response time at the time of application for a civil service position and if hired I will follow all the requirements of the Emergency Response Policy.

☐ I certify that currently I do not live within the established Emergency Response Policy but if hired I agree to move within the established response time within 6 months of the hire date and follow all the requirements of the Emergency Response Policy. Failure to do so shall be deemed a voluntary resignation from your employment with the city.

☐ I certify that I have confirmed with the City Human Recourse (HR) Office. And have determined that the position I am applying for is not an Emergency Response Personnel Position.

I hereby certify that the above information is true and correct and city staff may rely on this information as processing my application. I understand that any false statements may be cause for my disqualification or dismissal, regardless of when discovered.

Applicant's Name	Signature	Date

Your application will not be considered for employment if this page is not returned and signed with your application.