CITY OF HUBBARD
EMPLOYMENT APPLICATION

3720 2nd Street, PO Box 380 Hubbard, Oregon 97032
Phone: (503) 981-9633 Fax: 503-981-8742
www.cityofhubbard.org

1. Position applied for: _____

   Dept: _____

   Date available: _____

   Email: _____

   Type of work for which you are applying: Full Time ____ Part Time ____ Seasonal ____

   Desired Salary: _____

   Have you ever applied for a position with the City before? _____

   If so, explain: _____

2. Name: _____
   (Last) (First) (Middle)

   Address: _____
   Street, P.O. Box City State Zip Code

   Telephone No.: _____

   If less than 5 years at this address, previous address:

   Address: _____
   Street, P.O. Box City State Zip Code

3. Current Driver's License No: State and Class

   _____

   Previous Driver's License No: State and Class

   _____

4. Do you claim veteran's preference? ____Yes ____ No

   If yes, please attach a copy of Federal DD214 or 215 or a veteran's disability preference letter from the US Department of Veterans Affairs.

5. Have you been discharged or resigned from any position? ____Yes ____ No

If yes, explain here:

_____

_____

_____

6. Are you able, at the time of employment, to submit verification of your legal right to work in the U.S.?
____Yes ____ No

   If hired, you must complete the I-9 form required by the U.S. Immigration and Naturalization Service no later than three (3) business days after your date of hire.

7. Have you ever been convicted of a crime? ___Yes ___No

   A conviction record will not necessarily disqualify you for employment. If you answered yes, please describe fully the criminal conviction(s), listing the nature of the offense, year occurred, and outcome:

_____

_____

_____

8. Name and location of High School:

_____

   Or, name of facility and location where certificate of equivalency was obtained (GED):

_____

   Schools attended after high school or special training received:

Name and Location (City and State)	Major	Total Number of Hours	# Hours, Degree, or Certificate Earned

9. List any special training, licenses, certificates, machine skills, office equipment or other special skills you may have that are pertinent to the position for which you are applying.

_____

_____

_____

* If additional space is needed for education, training or skills, attach supplemental sheet.

Complete Work History: Begin with present employer or most recent experience.

From _____ (Mo/Yr) Name of Employer:_____

To _____ (Mo/Yr) Address:_____

Salary _____ Type of firm: _____ Telephone no:_____

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

Describe Duties:

_____

_____

_____

_____

This position was [ ] full time [ ] part time

Reason for Leaving:

_____

If you are still working here, may we contact this employer? ___Yes ___No

---

From _____ (Mo/Yr) Name of Employer:_____

To _____ (Mo/Yr) Address:_____

Salary _____ Type of firm: _____ Telephone no:_____

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

Describe Duties:

_____

_____

_____

_____

This position was [ ] full time [ ] part time

Reason for Leaving:

_____

From _____ (Mo/Yr) Name of Employer:_____

To _____ (Mo/Yr) Address:_____

Salary _____ Type of firm: _____ Telephone no:_____

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

Describe Duties:

_____

_____

_____

_____

This position was [ ] full time [ ] part time

Reason for Leaving:

_____

From _____ (Mo/Yr) Name of Employer:_____

To _____ (Mo/Yr) Address:_____

Salary _____ Type of firm: _____ Telephone no:_____

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

Describe Duties:

_____

_____

_____

_____

This position was [ ] full time [ ] part time

Reason for Leaving:

_____

---

*If additional space is needed for work history, please attach supplemental sheet.

10. **References** – In the spaces below give the names of ten (10) persons, minimum of five (5) that you are not related to who have known you for at least 1 year. There should be a combination of personal as well as business references. These individuals will be contacted during the background stage of the selection process.

Name	**Address**	**Phone Number**	**Years Acquainted**	**Relationship**

This section is voluntary, but is appreciated. Not for interview purposes.

How did you become aware of this employment opportunity?

- ☐ Newspaper - Which newspaper? _____
- ☐ City Employment Announcement
- ☐ City Employee
- ☐ City Website
- ☐ State Employment Office
- ☐ Other Explain: _____

Selection Policy

The City of Hubbard is an equal opportunity employer and does not discriminate on the basis of race, color, religion, gender, national origin, marital status, age, mental or physical disability, familial status, sexual orientation, gender identity or source of income in the admission or access to, employment in, its programs or activities. Veterans are encouraged to apply for open positions and will be given preference over non-veterans if equally qualified.

The Director of Administration/City Recorder, acting as the Human Resources Director, has been designated the EEO Officer and Americans with Disabilities Act Coordinator. Any questions relating to either area, the grievance procedure and associated rights should be directed to the Human Resources Program within the Administration Department of the City of Hubbard.

The City of Hubbard is committed to maintaining a safe and healthy workplace. Any offer of employment will be contingent upon criminal and civil record checks, other necessary job-related checks and reference checks. In addition, some positions may require a physical and/or psychological examination and drug screen. Some criminal convictions may be disqualifying.

The position for which you are applying involves a competitive selection process. All applications will be reviewed by the Human Resources Department. Applicants whose backgrounds appear to most closely match the needs of particular vacancies will be forwarded to the hiring department for consideration for interview.

The most competitive applicants for a particular vacancy will be interviewed by the hiring department and a final selection will be made. Due to the extremely large number of applicants and the limited number of job opportunities, a number of applicants do not proceed to the interview phase.

A job application is an important reflection on you. The way in which you complete your application can make a difference in determining whether or not you are selected to be interviewed for a job. If you need assistance in completing this application, please notify the Director of Administration/City Recorder in the Administration Department who will provide the necessary accommodation for the application to be completed.

Applications received by the City of Hubbard become the property of the City of Hubbard and cannot be returned. If you have any questions, please feel free to contact Human Resources staff.

Certification and Signature

I hereby certify that all statements and information provided on this application and throughout the interview process have been or will be true and complete.

I hereby authorize the City, its agents and employees to contact my former employers as well as others to verify information I have provided the City and to obtain information about me which the City deems relevant to my employment.

I authorize anyone having knowledge about me, including the officers, directors, owners, and employees of my former employers to disclose to the City all information relating to my past employment. I agree that any information released by my former employers to the City is released in good faith and I hereby waive the right to make any claim, suit, complaint, claim for damages, or legal action of any kind against any person, entity or their officers, directors, agents, insurers, or employees which relate in any way to providing information about me to the City, consistent with ORS 30.178.
I understand the City of Hubbard is committed to promoting safety and high standards of employee performance, productivity, and reliability. I agree that dependent on the position I am applying for, the City may require me to take and successfully pass a drug and alcohol test as a condition of my employment. I understand that if I have any prohibited substance in my system at the time of the drug test, the City may not hire me.

It is understood that by submitting this application for employment, I have agreed to allow the City to perform a review of publicly available criminal records as part of any background investigation.

_____ _____

Signature Date

Ethnicity & Race Data Collection Form

Providing this information is strictly voluntary on your part, and is not required to complete your Application for Employment. Nor will providing the information or not providing the information affect your application.

1. Ethnicity
   Are you Latino or Hispanic Yes _____ No _____

   Persons of Cuban, Mexican, Puerto Rican, South or Central American or other Spanish culture regardless of race.

2. Race
   How would you describe your racial identity?

   _____ American Indian or Alaska Native (Persons having origins in and of the original peoples of North and South America (including Central America) and who maintain a tribal affiliation or community attachment)

   _____ Asian (Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including Cambodia, China, India, Japan, Korean, Malaysia, Pakistan, the Phillipine Islands, Thailand, and Vietnam)

   _____ Black or African American (Persons having origins in any of the original peoples of the Black racial groups of Africa)

   _____ Native Hawaiian or other Pacific Islander (Persons having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands)

   _____ White (Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa)

   Those who choose more than one race will be identified as "multi-racial" for reporting purposes.

Supplemental Questionnaire
Police Department

1. Requirements

Must be a US citizen and at least 21 years of age by date of hire.

NO felony convictions. NO Class A Misdemeanor convictions within 24 months of application.

Must be able to work various shifts; nights, weekends, and holidays.

Must meet State requirements including vision, hearing, and standards for basic certification as a law enforcement officer by the Department of Public Safety Standards and Training (DPSST).

A valid Oregon driver's license, or ability to obtain by date of hire; **must pass driving records check** and, if hired, maintain a driving record that meets the City's standard. *Oregon law requires that an out-of-state license holder must obtain a valid Oregon license (with appropriate endorsements) within 30 days of becoming domiciled in the state (ORS 803.355).*

2. **ARREST RECORDS** (Complete all areas)

Have you ever been arrested or charged with any criminal violation? Yes_____ No_____

List **all** such matters, even if not formally charged, or no court appearance, or if found not guilty, or if settled by payment of fine or bail forfeiture.

DATE	*LOCATION*	*CHARGE*	*FINAL DISPOSITION*

Has any member of your family, including in-laws, or anyone with whom you are closely associated or have lived with, been arrested or charged with any crime other than traffic violations?

Yes_____ No_____

3. TRAFFIC RECORD

Has your driving privilege ever been suspended? Yes_____ No_____

If yes, what state was your license suspended or revoked? _____

List **all** traffic infractions and citations (except parking)

DATE	*LOCATION*	*CHARGE*	*FINAL DISPOSITION*

List all states in which you have been issued a driver's license. Start with most current driver's license.

STATE	*LICENSE NUMBER*	*STATE*	*LICENSE NUMBER*

4. MOTOR VEHICLE ACCIDENTS

Have you ever been involved in a motor vehicle accident? Yes_____ No_____

DATE	*LOCATION*	*INJURY?*	*POLICE INVESTIGATION/AGENCY*
		YES / NO	***YES / NO***
		YES / NO	***YES / NO***
		YES / NO	***YES / NO***
		YES / NO	***YES / NO***
		YES / NO	***YES / NO***

5. ESSAY

On a supplemental sheet, write one or more paragraphs on why you want to work for the City of Hubbard Police Department. *Your application will be rejected if this supplemental sheet is not attached.*

6. PERSONAL PROFILE

You are going to be asked several personal questions regarding drug usage, work history, military service, credit history and other similar questions. You must answer them truthfully. **If you answer yes to any question, you must give a complete explanation on a separate sheet of paper.** Include approximate year or years that it took place. Your answers must be type written and attached to this application. A yes answer to the following questions does not mean that it will automatically disqualify you from further consideration. That is why a full explanation is so important.

Have you ever or are you now:

Used an illegal controlled substance as defined under the US Controlled Substances Act?	*YES*	*NO*
Illegally manufactured, sold or delivered any drugs?	*YES*	*NO*
Been a chronic user of alcoholic beverage?	*YES*	*NO*
Been arrested or convicted for driving under the influence or any alcohol-related offenses?	*YES*	*NO*
Been on duty under the influence of alcohol or drugs?	*YES*	*NO*
Been accused of abusing prescription medication?	*YES*	*NO*
Using any medication not prescribed to you?	*YES*	*NO*
Under medical treatment for any medical condition or injury?	*YES*	*NO*
Engaged in illegal gambling?	*YES*	*NO*
Can you meet the attendance requirements of this job? (i.e. holidays, rotating shifts and work days). Indicate how many days you took leave last year.	*YES*	*NO*
Did you have any unauthorized absences for work last year?	*YES*	*NO*
Been discharged from any position for failing to pass a probationary period?	*YES*	*NO*
Been discharged from any position?	*YES*	*NO*
Resigned from any position to avoid discharge or demotion?	*YES*	*NO*
Been subject to disciplinary action while employed as a law enforcement officer?	*YES*	*NO*
Had your wages attached or garnished?	*YES*	*NO*
Been a defendant to a small claims or other civil court action?	*YES*	*NO*
Had a judgment rendered against you?	*YES*	*NO*
Filed for bankruptcy or been declared bankrupt?	*YES*	*NO*
Been refused credit?	*YES*	*NO*
Had any of your property repossessed?	*YES*	*NO*
Been delinquent in paying any of your taxes?	*YES*	*NO*
Is there any current or pending civil action against you?	*YES*	*NO*
To your knowledge, have you ever been the subject to any criminal or civil rights investigation?	*YES*	*NO*
Advocated or participated in the violation of the laws of the US, this state, or any other state or political subdivision? If yes, please describe the violation.	*YES*	*NO*
Applied for employment with any criminal justice system agencies (Provide agency name and date(s) of application).	*YES*	*NO*
Had any licenses issued to you (other than driver's license)?	*YES*	*NO*
Had a license revoked or suspended? If so, explain and give date of revocation or suspension.	*YES*	*NO*
Been refused by a bonding company?	*YES*	*NO*
Should you be employed by this department, do you anticipate any income from any source other than your regular salary?	*YES*	*NO*
Do you presently have any income from any source other than your regular salary?	*YES*	*NO*
Have you applied for a permit to carry a concealed weapon?	*YES*	*NO*
If YES, was the permit granted?	*YES*	*NO*
If so, give date, name of law enforcement agency, and the purpose for the concealed weapon.		

CURRENT APPLICATIONS, BACKGROUNDS OR HIRING LISTS

Are you on a current hiring list with any police agency (background completed and waiting for opening):

1._____

2._____

3._____

List all police agencies you are currently in the background investigation phase of the application process:

1._____

2._____

3._____

List all police agencies you have made application for employment, but have not processed into the background investigation phase:

1._____

2._____

3._____

4. _____

5. _____

List all police agencies that you applied and the application was rejected or you were not offered the position due results of testing or background:

1._____

2._____

3._____