



Chehalem Park and Recreation District

125 S. Elliott Road, Newberg, OR 97132

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EMPLOYMENT APPLICATION

FORM 1A

Application may be void if not filled out completely.

Last Name First M.I. Position Applied For

Home Address Application Date

City State Zip How did you learn about this position?

Phone Number (____) _____ - _____ **Email address** _____

REFERENCES

Please list three persons of reference whom we may contact, preferably professionally relevant. Do not include family members.

Name	Phone number	Relationship	No. of years known
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you ever been employed here before? _____ If yes, please give date: _____

PROFESSIONAL, CIVIL, OR SERVICE SOCIETIES AND MEMBERSHIPS

Name of Organization	Offices held, Committees	Dates
_____	_____	_____
_____	_____	_____

EMPLOYMENT HISTORY - Attach separate sheets if needed. Attach resume and cover letter (preferred but optional).

List your experience, beginning with your present or most recent position. Describe each position separately, emphasizing your professional, supervisory and committee duties. Give special attention to experience relating to the position for which you are applying.

_____ EMPLOYER	_____ FROM: MO/YEAR
_____ ADDRESS	_____ TO: MO/YEAR
_____ SUPERVISOR'S NAME AND TELEPHONE	_____ FULLTIME
_____ YOUR TITLE	
_____ DUTIES (BE SPECIFIC)	
_____ REASON FOR LEAVING	_____

_____ EMPLOYER	_____ FROM: MO/YEAR
_____ ADDRESS	_____ TO: MO/YEAR
_____ SUPERVISOR'S NAME AND TELEPHONE	_____ FULLTIME
_____ YOUR TITLE	
_____ DUTIES (BE SPECIFIC)	
_____ REASON FOR LEAVING	_____

EMPLOYMENT HISTORY CONTINUED - Attach separate sheets if needed. Attach resume (optional).

List your experience, beginning with your present or most recent position. Describe each position separately, emphasizing your professional, supervisory and committee duties. Give special attention to experience relating to the position for which you are applying.

_____ EMPLOYER	_____ FROM: MO/YEAR
_____ ADDRESS	_____ TO: MO/YEAR
_____ SUPERVISOR'S NAME AND TELEPHONE	_____ FULLTIME
_____ YOUR TITLE	
_____ DUTIES (BE SPECIFIC)	
_____ REASON FOR LEAVING	_____

_____ EMPLOYER	_____ FROM: MO/YEAR
_____ ADDRESS	_____ TO: MO/YEAR
_____ SUPERVISOR'S NAME AND TELEPHONE	_____ FULLTIME
_____ YOUR TITLE	
_____ DUTIES (BE SPECIFIC)	
_____ REASON FOR LEAVING	_____

EDUCATION (or professional training or study)

MILITARY SERVICE ____ Yes ____ No

Dates _____

Branch _____

SPECIALIZED TRAINING, WORKSHOPS, INSTITUTES OR SEMINARS

Name & Location	Dates	Fields of Study	Titles of Special Courses
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AGREEMENT

I certify that answers given herein and within the attached skills sheets are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. Chehalem Park and Recreation District is authorized to contact my present and past employers as references and to receive from them any information about me contained in their personnel records and any evaluations of my job knowledge, skills and performance. I hereby release those contacted by the District from any liability or damage that may result from furnishing the information requested. The District may make copies of this authorization available to those contacted.

In the event of employment, I understand that false or misleading information given in my application, skill sheets or interview(s) may result in discharge. I understand, also, that I am required to abide by all policies and procedures of this agency.

May we contact your present employer without first contacting you? _____

_____ Signature of applicant	/	/	_____ Date
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EQUAL OPPORTUNITY EMPLOYMENT STATEMENT
 It is the practice of Chehalem Park and Recreation District to ensure employment of individuals on an equal opportunity basis, without discrimination as to race, color, religion, national origin, disability, family relationships, worker's compensation history, gender or age (except where gender and age are bona fine occupational qualifications) within all operations of the District.

Chehalem Park and Recreation District

Veterans' Preference Form (ORS 408.230)

Veterans who meet the minimum qualifications for a position open for recruitment may be eligible for preference in employment under Oregon law. **If you are a Qualified Veteran or Qualified Disabled Veteran and would like to be granted preference in the selection and hiring process for a specific posted job, please fill out this Veterans' Preference Form and provide proof of eligibility by submitting a copy of form DD-214 or 215 (copy 4).** This completed form and required supporting documentation must be submitted with your application for consideration for Veterans' Preference.

Qualified Veteran Questions: *Veterans' preference may be claimed if you check at least one of the boxes below and provide proof via form DD-214 or 215 (Copy 4)*

ORS 408.225(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

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

For a period of 178 days or less and was discharged or released from active duty under honorable conditions because of a service due to a service related disability

For a period of 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

For at least one day in a combat zone and was discharged or released from active duty under honorable conditions

And 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

And am receiving a nonservice – connected pension from the United States Department of Veterans Affairs

Qualified Disabled Veteran Questions: *Additional preference may be claimed if you check at least one box below and provide proof of eligibility via a copy of DD214 or 15, Copy 4, and a public employment preference letter from the United States Department of Veteran's Affairs (letter may be requested by calling 800-827-1000)*

I am entitled to disability compensation under laws administered 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 Veterans' Preference, have attached proof of eligibility as directed 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.

Signature: _____

Date: _____

Position Applied For: _____