



EMPLOYEE AUTHORIZATION FORM 3A/4A

Please print Legibly. Items with * will be used for employee verification during onboarding procedure.

Employee Legal Name*: _____
Address (include zip code*): _____
Phone*: (____) _____ Mobile. Alternate/landline Phone: (____) _____
Email*: _____

Request to hire for the position of: _____ Primary GL Code: _____ PM Code: _____
Secondary GL: _____ PM Code: _____

Please circle all that apply:

Full Time Part Time Seasonal/Temporary Permanent New Hire Returning Current

Rate of Pay: \$ _____ per hour OR \$ _____ Salary per year/month (please circle)
Grade: _____ Step: _____

Today's Date: _____ Estimated Start Date: _____

Method of Selection: Open Comp _____ Promotion _____ Rehired _____ Other _____
Note reason if "Other" is selected: _____

Standard Interview Form Completed: Yes _____ (attach) No _____ if no, why? _____

New Position? Yes _____ No _____ Budgeted? Yes _____ No _____
If new or budgeted, explain need/approval _____

I, _____, agree to conduct myself in a manner worthy of employment by Chehalem Park and Recreation District, and I acknowledge that I have read all the rules and regulations pertaining to employment with the District. I understand and have been given opportunity to ask questions and am satisfied all procedures are clear and understood. I realize that failure to adhere to these could result in termination. I also agree to complete all forms necessary for employment within 48 hours and understand the schedule for paychecks to be issued and understand my responsibilities to receive a paycheck. I also have had the benefits explained and am aware of my eligibility. I understand the organizational chart and who my immediate supervisor is.

My primary duties include, but are not limited to:

This job offer and its start date are contingent upon my background screening, reference screening, and completion of all necessary employment paperwork including, but not limited to filling out all required documents online and providing in person legal identification to complete my I-9.

Hiring Supervisor Signature: _____ Administrative Supervisor Signature: _____

Date paperwork (1A, 2A, 3A) submitted to Administrative office for processing: _____

Superintendent Signature: _____ Date: _____