



CLACKAMAS COUNTY APPLICATION FOR TEMPORARY EMPLOYMENT

POSITION APPLIED FOR: _____ DATE: _____

Name: _____
Last First MI

Address: _____
and Street City State Zip

Phone #: _____ Email: _____

WORK EXPERIENCE: *Please list all experience (paid and unpaid) you believe is relevant to the position for which you are applying. An additional sheet may be used for additional experience. Information submitted will be considered by Human Resources in determining salary placement.*

Employer	City, State	From: Mo/Day/Yr	To: Mo/Day/Yr
Title	Hours per week	Supervisor	Phone

Duties: _____

Reason for Leaving: _____ May we contact Supervisor ? _____

Employer	City, State	From: Mo/Day/Yr	To: Mo/Day/Yr
Title	Hours per week	Supervisor	Phone

Duties: _____

Reason for Leaving: _____ May we contact Supervisor? _____

Employer	City, State	From: Mo/Day/Yr	To: Mo/Day/Yr
Title	Hours per week	Supervisor	Phone

Duties: _____

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Reason for Leaving:

May we contact
Supervisor?

Employer	City, State	From: Mo/Day/Yr	To: Mo/Day/Yr
Title	Hours per week	Supervisor	Phone

Duties: _____

Reason for Leaving:

May we contact
Supervisor?

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EDUCATION LEVEL

Highest Grade/Degree Completed: _____ Major: _____

CERTIFICATIONS/LICENSE

Type: _____ Issue Date: _____ Expiration: _____

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- 1) To the best of your knowledge, are you able to perform the duties of the position for which you are applying, with or without reasonable accommodation? **Yes** ☐ **No** ☐
- 2) Are you currently authorized to work in the United States and able to provide proof of your eligibility to work in the United States prior to your first day of work once an offer of employment has been accepted? **Yes** ☐ **No** ☐
- 3) Have you ever worked for Clackamas County previously? **Yes** ☐ **No** ☐
- 4) Are you requesting veteran's preference points? (If requesting veterans' preference points under eligibility criteria of ORS 408.230-408.235, please submit supporting documentation to jobs@clackamas.us. When submitting documentation please reference the posting job title and department in your email.) **Yes** ☐ **No** ☐

REFERENCES: (Please exclude relatives)

1.			
	Reference Name	Email Address	Phone
2.			
	Reference Name	Email Address	Phone
3.			
	Reference Name	Email Address	Phone

CLACKAMAS COUNTY - APPLICATION FOR TEMPORARY EMPLOYMENT

My signature authorizes Clackamas County, acting by and through its designated representative, to contact any previous employers and supervisors, including all persons with and for who I have worked, to access any and all information, excluding salary information, regarding my present and previous employment.

I affirm that all information in this application is true to the best of my knowledge and understand that falsification or misrepresentation of information, may result in disqualification from employment consideration.

Applicant Signature

Date

EQUAL EMPLOYMENT OPPORTUNITY

Clackamas County is an Equal Opportunity Employer. We value diversity, equity, and inclusion as essential elements that create and foster a welcoming workplace. All qualified persons will be considered for employment without regard to race, color, religion, sex, sexual orientation, gender identity, national origin, age, political affiliation, disability or any other factor unrelated to the essential functions of the job.