

# EMPLOYMENT APPLICATION



## SNOHOMISH COUNTY'S NON-DISCRIMINATION POLICY

It is Snohomish County's policy that persons shall not be discriminated against in employment because of race, color, national origin, creed, religion, sex, age (40+), marital status, sexual orientation or disability. Snohomish County values diversity and strives to have a diverse work force and is committed to Equal Employment Opportunities and Affirmative Action. Snohomish County actively encourages members of diverse communities to apply.

**AMERICANS WITH DISABILITIES ACT (ADA) NOTICE:** Individuals who need an ADA accommodation to complete the application, test, or interview process please call 1-800-562-4367 (voice) or 425-388-3411 (voice). TTY/TDD users please call relay number: 1-800-833-6388. **Alternative format available upon request. Please provide one week advance notice.**

**Instructions:** Please type or print legibly in ink. Sign and date the application. An incomplete application may affect your eligibility or experience credit. Writing the words "See Resume" under employment history is not acceptable. If employed, this application will become part of your permanent record.

Scoring Information (CS use only)	Supplemental Score %	Written Score %	Oral Board Score %	Phys Ability Score	Veteran's Pref. %	Keyboard	Total	List #
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## GENERAL INFORMATION

<b>Position Applying For:</b>	Would you accept part time? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Temporary employment? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Volunteer Reserve Deputy? <input type="checkbox"/> Yes <input type="checkbox"/> No

Last Name	First Name	Middle Initial
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Mailing Address	City	State	Zip
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Social Security #	Home Phone ( )	Work Phone ( )	Message Phone ( )
E-Mail:			

Are you now or have you ever been employed by Snohomish County Government? <input type="checkbox"/> Yes <input type="checkbox"/> No	Title of Job Held	Department Employed by	Is/was this a temporary position? <input type="checkbox"/> Yes <input type="checkbox"/> No Is/was this a regular position? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Are you a Snohomish County Government union member?  Yes  No  
 If so, which union? AFSCME  Teamsters  Other   
 Are you applying for a Transfer?  Yes  No      Are you applying for a Voluntary Demotion?  Yes  No

Do you have relatives working for Snohomish County?  Yes  No      Name(s)  
 Relationship      Department

Have you, within the last ten years, been convicted of a crime or released from prison?  Yes  No  
 Are there any criminal charges currently pending against you?  Yes  No  
 If the answer to either of these questions is "yes", please explain. \_\_\_\_\_  
 \_\_\_\_\_  
 (A conviction record will not automatically bar you from consideration for employment.)

If valid driver's license is an essential function and required on the job announcement please answer the following:  
 Do you have a Washington Driver's License?  Yes  No      License #  
 Your driving record may be subject to review.

Are you under age 21?  Yes  No      Date of birth      /      /      Are you a United States citizen?  Yes  No

**VETERAN'S PREFERENCE:** Snohomish County gives veterans' preference in accordance with state law to veterans honorably discharged from active military service. Do you claim veterans' preference?  Yes  No      If yes, complete the following items: Are you retired from military service?  Yes  No  
 Have you ever obtained employment through the use of veterans' preference?  Yes  No  
 All dates of active duty:      /      /      to      /      /      Attach to this application a copy of your DD214 and the Veteran's Preference Form (obtained from the Human Resources Department or downloaded from the Snohomish County website)

## EDUCATION

Name of high school, college, university, vocational school	Dates attended		Years completed				Major	Type of Degree
	From	To	1	2	3	4		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

Indicate any other trades, skills or licenses you possess related to the position. Include licensing state and expiration date.

**PERSONAL COMPUTERS:** (check all that apply)  
 Word Processing     Spreadsheet     Database     Other    List software used:

## EMPLOYMENT HISTORY

Beginning with your most recent employment history, list all your work experience including self-employment, military service, volunteer work and periods of unemployment. Attach additional sheets if necessary. Be as complete as possible, failure to provide thorough information may result in rejection of this application. **Resumes will not be accepted in place of completing this application.**

Employer:	Supervisors Name:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, phone number: (    )
Address:		Date Employed (MO/YR): From:                      To:	
Most recent position:	Hours worked per week:	Total number months worked:	
Reason for leaving:	Name used at this employer, if different:		
Summarize major work duties: (DO NOT write "see resume")			

Employer:	Supervisors Name:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, phone number: (    )
Address:		Date Employed (MO/YR): From:                      To:	
Most recent position:	Hours worked per week:	Total number months worked:	
Reason for leaving:	Name used at this employer, if different:		
Summarize major work duties: (DO NOT write "see resume")			

Employer:	Supervisors Name:	May we contact? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, phone number: (    )
Address:		Date Employed (MO/YR): From:                      To:	
Most recent position:	Hours worked per week:	Total number months worked:	
Reason for leaving:	Name used at this employer, if different:		
Summarize major work duties: (DO NOT write "see resume")			

I HEREBY CERTIFY that to the best of my knowledge the answers made hereon are true and complete. I understand that if employed, any misrepresentation or omission of facts on this application is sufficient cause for dismissal. I understand this information may be the basis of an employment decision, and I hereby authorize my current and former employers and all schools or education/technical institutions I have attended to provide Snohomish County information regarding my employment and school records. I hereby release my current and former employers and educational institutions, their agents and employees from any liability in responding to inquiries in connection with my application for employment. I also hereby authorize Snohomish County Human Resources or its agent to conduct a criminal background check.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_.

Name \_\_\_\_\_

## Disability Status Information

**Disability Status:** A person with a disability is a person who has a physical or mental impairment which substantially limits one or more major life activities, or has a record of such impairment, or is perceived as having such an impairment, as defined by the Americans with Disabilities Act. An accommodation may be necessary to provide a person with a disability equal employment opportunity.

Will you need accommodation due to disability in the application, testing or interview process:  Yes  No  
Please provide a brief description of the accommodation requested:

Please complete the following if you requested an accommodation for the application, testing or interview process:  
Title of the position for which you are applying:

## Voluntary Affirmative Action Data

### Race/Ethnicity

Your race or ethnicity is used for Equal Employment Opportunity and Affirmative Action reporting. While providing this information is completely voluntary, it is critical to government reporting and the County's Affirmative Action planning. Any information you provide will be kept confidential and will be reported only as required in statistical summaries.

Race/ Ethnicity Code	Description
<input type="checkbox"/> US-Black or African Amer	<b>Black or African American</b> - A person having origins in any of the black racial groups of Africa.
<input type="checkbox"/> US-Asian	<b>Asian</b> - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<input type="checkbox"/> US-White	<b>White</b> - A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
<input type="checkbox"/> US-Amer Ind/Ala Nat	<b>American Indian or Alaskan Native</b> - A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
<input type="checkbox"/> US-Hispanic or Latino	<b>Hispanic or Latino</b> - A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
<input type="checkbox"/> US-Native Haw/Pac	<b>Native Hawaiian or Other Pacific Islander</b> - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

Sex:  Male  Female

SNOHOMISH COUNTY SHERIFF'S  
SUPPLEMENTAL QUESTIONNAIRE #1

Name: \_\_\_\_\_  
(Please print or type)

GENERAL INFORMATION:

This questionnaire is provided to you at the request of the Snohomish County Sheriff. Please complete and return it along with your employment application.

The Snohomish County Sheriff's Office conducts background investigations on candidates for positions in the Sheriff's Office who have satisfactorily completed the Civil Service Commission examination process and have been certified as eligible for appointment. Such an investigation includes, but is not limited to, a Sheriff's Office interview, neighborhood check, employer check, polygraph check, psychological profile, medical evaluation, pre-employment drug screening, as well as criminal and driving records and financial history checks. During the polygraph examination, your answers to the following questions will be verified. Falsification of information on this form will be grounds for removal from the eligibility list or dismissal, if hired.

The Rules and Regulations of the Snohomish County Civil Service Commission provide that, upon request of the Snohomish County Sheriff, the Commission may remove the name of an eligible person from an eligibility list for failure to satisfactorily complete any phase of the background or other examination administered by the Snohomish County Sheriff. The Commission makes the final decision on the request.

The Snohomish County Sheriff strongly believes that the effectiveness of a Sheriff's Office hinges on the quality of its personnel and the level of public trust in those personnel. Snohomish County Sheriff's Office employees need sound character, honesty, integrity, intelligence, tact, good judgment, physical courage, verbal communication skills, emotional and financial stability, impartiality, understanding, and sensitivity.

This questionnaire is provided in an effort to assist you in determining whether or not you meet the Snohomish County Sheriff's standards for appointment to a position in the Snohomish County Sheriff's Office. If you answer "yes" to any of the following questions, you may not be eligible for employment. Extenuating circumstances may be reviewed at the discretion of the Sheriff or the Commission.

SECTION A - PREVIOUS DRUG USAGE:

1. Have you used marijuana or any other controlled substance not prescribed for you by an authorized individual since you first began seeking employment in law enforcement?  **Yes**  **No**
2. Have you ever used illegal drugs while employed or after having been employed by a law enforcement agency?  **Yes**  **No**
3. Have you ever sold, offered to sell, or transported for sale, any illegal drugs or narcotics, regardless of time frame?  **Yes**  **No**
4. Have you used marijuana or its derivative within the last five (5) years?  **Yes**  **No**
5. Have you used hallucinogenic drugs such as LSD, PCP, mushrooms, etc. (excluding marijuana) within the last five (5) years?  **Yes**  **No**
6. Have you used any non-prescribed opiates or narcotics, i.e., heroin, morphine, opium, within the last five (5) years?  **Yes**  **No**
7. Have you used anabolic steroids within the last five (5) years?  **Yes**  **No**
8. Have you used cocaine or its derivatives within the last five (5) years?  **Yes**  **No**
9. Have you used a clandestine amphetamine/methamphetamine, i.e., crank, crystal, ice, speed within the last five (5) years?  **Yes**  **No**

SECTION B - CRIMINAL HISTORY:

1. Have you been convicted of a felony?  **Yes**  **No**
2. Have you been convicted of a misdemeanor in the past year, or two (2) or more misdemeanors in the past five (5) years?  **Yes**  **No**

SECTION C - DRIVING RECORD:

1. Have you had your driver's license suspended or revoked for DUI, reckless driving, or hit and run, within the last three (3) years?  Yes  No

2. Using the following point schedule, have you accumulated more than six (6) points in the past two (2) years, or more than ten (10) points in the past five (5) years?  Yes  No

2 points for standard moving violation

2 points for speeding 1-14 miles over speed limit

3 points for speeding 15-19 miles over speed limit

4 points for speeding 20-25 miles over speed limit

6 points for hit and run unattended, negligent driving with accident, reckless driving or DUI non-accident

8 points for hit and run attended, reckless or DUI with accident, negligent homicide, vehicular assault

All the information provided on this questionnaire is true and accurate to the best of my knowledge. I understand that this information will be verified and that any misstatement will result in removal from the eligibility list and/or the position, if hired.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Print or type name: \_\_\_\_\_

Title of Position Applied for: \_\_\_\_\_

I learned about this job opening from: (check all that apply). If you check any of the items in the first column, please also indicate the title of the publication or name of the person or the source of your information. Thank you.

- Newspaper \_\_\_\_\_
- County Employee \_\_\_\_\_
- Magazine \_\_\_\_\_
- Other Source \_\_\_\_\_

- Friend \_\_\_\_\_
- Bulletin Board \_\_\_\_\_
- County Web Site \_\_\_\_\_
- Job Line \_\_\_\_\_