

EMPLOYMENT APPLICATION

Position Applying For:

Date

Please Note

*Clackamas County Children's Commission only accepts applications for currently open positions.
 *An application must be completed for each position for which you are applying. If you are interested in more than one position, we recommend you apply for the position that you are most interested in.
 *Your candidacy for open positions may be rejected if you do not complete all applicant fields below. Applications that state "see resume" may be considered incomplete.
 *You must complete an application even if you will be attaching a resume.
 *If you need accommodations in completing this application, or in any other portion of the hiring process, please contact Human Resources at 503-675-4565 or jobs@cccchs.org.

PERSONAL

First Name Middle Initial Last Name
 Address City State Zip Code
 Phone 1 Type Phone 1 Type email

EDUCATION

	School Name	City, State	Major	Graduated?	Degree
High School/GED				<input type="checkbox"/> Yes	
College/Tech Sch				<input type="checkbox"/> Yes	
College/Tech Sch				<input type="checkbox"/> Yes	
Other				<input type="checkbox"/> Yes	

EXPERIENCE

Please list all paid or applicable volunteer work experience, starting with the most recent.

	Current/Most Recent	Next Most Recent	Next Most Recent	Next Most Recent
Title				
From (Mo/Yr)				
To (Mo/Yr)				
Reason for Leaving				
Employer Name City, State, Phone Number	() -	() -	() -	() -
Supervisors Name/Title/Email				
Job Duties				

Licenses/Certifications

- Valid Drivers License
- Valid CDL
- Current Food Handler's Permit or ServSafe
- Valid Bus Driver Certificate
- Enrolled Central Background Registry
- Child/Adult First Aid & CPR Certification

Referred By

- Indeed
- Craigslist
- CCCC Website
- OR Employment Department
- Idealist
- Macslis
- Other: _____

EMPLOYMENT APPLICATION

Name Position Applying For:

Languages

Please select your native language and any other languages with which you are familiar.

Language <input type="text"/>	Speaking <input type="text"/>	Listening <input type="text"/>	Read/Write <input type="text"/>
Language <input type="text"/>	Speaking <input type="text"/>	Listening <input type="text"/>	Read/Write <input type="text"/>
Language <input type="text"/>	Speaking <input type="text"/>	Listening <input type="text"/>	Read/Write <input type="text"/>

Computer Programs

Please check any computer programs with which you have worked and select your ability level.

<input type="checkbox"/> MS Word or similar	Level <input type="text"/>	<input type="checkbox"/> MS Outlook or similar	Level <input type="text"/>
<input type="checkbox"/> MS Excel or similar	Level <input type="text"/>	<input type="checkbox"/> Other: <input type="text"/>	Level <input type="text"/>

Relationships

Are you a current CCCC parent? Yes No

Are you a former CCCC or other Head Start program parent? Yes No

Were you referred by a current CCCC employee? Yes No If yes, who?

Are you related to a current CCCC employee? Yes No If yes, who?

Are you related to a current CCCC board member? Yes No If yes, who?

Have you previously worked for CCCC? Yes No If yes, when?

REFERENCES

Please provide 3 individuals who are familiar with your work and/or volunteer history. If you do not have prior work history, you may utilize a secondary reference (e.g. teachers, school/career counselors, community leaders, etc.)

Name	Phone Number	Title	Relationship

I hereby certify that the facts set forth in the above employment application are true and complete to the best of my knowledge and I authorize Clackamas County Children's Commission to verify their accuracy and to obtain reference information on my work performance. I understand that falsified statements of any kind or omissions of facts called for on this application shall be considered cause for denial of employment or immediate dismissal.

I understand that, if employed, I will fully adhere to the policies, rules and regulations of employment of the Clackamas County Children's Commission. However, I further understand that neither the policies, rules, or regulations of employment, nor anything said during the interview process, shall be deemed to constitute the terms of an implied employment contract. I understand that any employment offered is for an indefinite duration and at will and that either I or the Clackamas County Children's Commission may terminate my employment at any time with or without notice or cause.

Applicant's Signature Date

EQUAL EMPLOYMENT OPPORTUNITY

Clackamas County Children's Commission is an equal opportunity employer. Clackamas County Children's Commission does not discriminate in employment on account of race, color, religion, national origin, citizenship status, ancestry, age, sex, sexual orientation, marital status, physical or mental disability, military status or unfavorable discharge from military service.

EMPLOYMENT APPLICATION

Name Position Applying For:

EQUAL EMPLOYMENT OPPORTUNITY: Voluntary Self Identification Form

Clackamas County Children's Commission is an Equal Opportunity Employer. As required by law, we must record certain information to complete annual EEO reporting.

Applicants for employment are also invited to participate by reporting their status as disabled, disabled veteran, veteran of the Vietnam era or other minority. In extending this invitation you are also advised that: (a) workers (applicants) are under no obligation to respond, but may do so in the future if they choose; (b) responses will remain confidential within the Human Resources Department; and (c) responses will be used only for the necessary information to include in our EEO reporting. We are a company that values diversity. We actively encourage women and minorities to apply. Refusal to provide this information will have no bearing on your application and will not subject you to any adverse treatment.

Please complete the information requested below. Thank you for your cooperation.

Veteran Status

- Vietnam Era Veteran
 Special Disabled Veteran
 Other Protected Veteran
 Recently Separated Veteran
 Armed Forces Service Medal Veteran
 Not a Veteran
 Decline to self-identify

Gender

- Male Female Decline to self-identify

RACE OR ETHNIC IDENTITY

- Hispanic or Latino
 White (not Hispanic or Latino)
 Black or African American (not Hispanic or Latino)
 Native Hawaiian or Other Pacific Islander (not Hispanic or Latino)
 Asian (not Hispanic or Latino)
 American Indian or Alaska Native (not Hispanic or Latino)
 Two or More Races (not Hispanic or Latino)
 Decline to self-identify

Please review your application for completeness and accuracy

Print and sign the application

Mail to - Human Resources, CCCC, 16518 SE River Road, Milwaukie, OR 97267

OR

Fax - 503-822-3687

OR

Email - jobs@cccchs.org

Due to a high volume of applications we are unable to respond to requests regarding application status.