



P.O. Box 519
301 Yakima Street, 3rd Floor
Wenatchee, WA 98807-0519
(509) 888-3603 fx.(509) 888-3636

APPLICATION FOR EMPLOYMENT

Police Department Recruitment

The City of Wenatchee is proud to be an equal opportunity employer. Our objective is to provide equal opportunity in all terms, conditions, and privileges of employment for qualified applicants and employees without regard to race, creed, color, religion, national origin, sexual orientation, gender, gender identity, age, marital status, disability, veteran or military status, or any other characteristic protected by law.

NAME _____
Last _____ First _____ M.I. _____

ADDRESS _____
Street _____ Apt. # _____

_____ City _____ State _____ Zip _____

PHONE _____
Include Area Code Home _____ Work _____ Cell _____

EMAIL _____

Have you filed an application or been employed here before? Yes No Date(s) _____

The City will require a Criminal Background Check for the successful applicant. Yes No
Would you have an objection to this report?

Are you able to perform the primary duties of the job as outlined in the job description? Yes No
If no, please explain: _____

(No applicant will be rejected as a result of a disability that, with reasonable accomodation, does not prevent performance of the primary job duties.)

PLEASE READ CAREFULLY BEFORE SIGNING

I confirm that all information I have provided in my application materials is true, complete, and correct. I also confirm that I have not omitted any information called for by this application. I understand that any information I provide (or fail to provide) that is found to be false, incomplete, or contains a misrepresentation in any respect will be sufficient cause to (i) cancel further consideration of this application or (ii) subject me to discipline, up to and including termination, if I am hired.

I expressly authorize, without reservation, The City of Wenatchee, its representatives, employees, or agents to contact and obtain information from all current/previous employers and references and to verify the accuracy of all information provided by me in this application. I hereby waive all rights and claims I may have regarding The City of Wenatchee or its representatives for seeking, gathering, and using such information in the employment process and all other persons or organizations for furnishing information about me.

I have read, fully understand, and accept all terms of the above Applicant Statement. I also understand that if my application is not signed, it is not complete and I may be disqualified from being considered for this position.

Signature

Date