

MOUNT ANGEL FIRE DISTRICT

300 Monroe Street / Post Office Box 335

Mt. Angel, OR 97362

503-845-2438

www.mtangelfire.org



OFFICE ADMINISTRATOR

APPLICATION

GENERAL INFORMATION

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Please print or type

All pages of this application must be completed. Information provided is kept confidential for your protection.

Position Applying For: _____ **Date:** _____

Name: _____

Home Address: _____

City, State: _____ **Zip:** _____

Mailing Address: (if different from above) _____

City, State: _____ **Zip:** _____

Home Phone: _____ **Cell Phone:** _____ **Message Phone:** _____

EDUCATION

School	Name & Location	Course of Study	Years Completed	Degree/Diploma
High School or GED				
College				
Graduate				
Business				
Trade				

Do you have any other relevant education or certifications?

Explain: _____

WORK EXPERIENCE

Please list all of your work experience beginning with the most recent job held. If you were self-employed, give business name. Attach additional sheets if necessary.

Employer _____ **Employed From** _____ **mo/yr To** _____ **mo/yr**

Position _____

Supervisor's name _____ **Phone (_____)** _____

Address _____ **City/State/Zip** _____

Duties/responsibilities: _____

Reason(s) for leaving: _____

May we contact your supervisor/employer? **YES** **NO**

Employer _____ **Employed From** _____ **mo/yr To** _____ **mo/yr**

Position _____

Supervisor's name _____ **Phone (_____)** _____

Address _____ **City/State/Zip** _____

Duties/responsibilities: _____

Reason(s) for leaving: _____

May we contact your supervisor/employer? **YES** **NO**

Employer _____ **Employed From** _____ **mo/yr To** _____ **mo/yr**

Position _____

Supervisor's name _____ **Phone (_____)** _____

Address _____ **City/State/Zip** _____

Duties/responsibilities: _____

Reason(s) for leaving: _____

May we contact your supervisor/employer? **YES** **NO**

SUPPLEMENTAL QUESTIONS

Briefly explain your interest in this position.

Please indicate briefly any job-related skills or additional information you feel may be helpful to us in considering your application.

Please explain your experience and/or knowledge of Oregon Budget Law, and your experience working with a budget.

Please list your office equipment related skills and experience. What is your experience with Quickbooks, and with Microsoft Word, Excel, Publisher?

Please indicate your experience with accounts payable, accounts receivable, and payroll duties.

SPECIAL SKILLS, QUALIFICATIONS AND CONSIDERTIONS

Summarize special skills and qualifications, volunteer activities, community involvement, employment or other activities related to the job you are seeking.

Please read the following carefully and sign below:

Have you ever been convicted of a felony on or after your eighteenth birthday? YES NO
(Do not include traffic violations or misdemeanor offenses)

If yes, explain each conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. Each conviction will be evaluated individually with respect to time, circumstances and seriousness.

By my signature below, I certify that all answers and statements on this application are true and complete to the best of my knowledge. I understand that should an investigation disclose untruthful or misleading answers, my application may be rejected or my status as a member be terminated.

Applicant Signature: _____ **Date:** _____



MT. ANGEL FIRE DISTRICT

Pre-Employment Agreement
Authorization to Release Information

AUTHORIZATION TO RELEASE INFORMATION
Please read carefully and initial each statement before signing

Statement

Initials

My employment with the Mt. Angel Fire District is contingent upon investigation of my background, including but not limited to: character, criminal and driving history.

I understand that this document, signed by me, authorizes the Mt. Angel Fire District to investigate criminal record, driving record, employment history, and any other records deemed necessary to determine job related qualifications for a volunteer position with the Mt. Angel Fire District.

I certify that I have never been arrested or convicted of a felony. Any exceptions are explained in writing and attached to this document. Should any statements or claims be found to be fraudulent, I fully understand that I may be terminated or disqualified from all membership considerations with the Mt. Angel Fire District.

I understand that this document signed by me authorizes the Mt. Angel Fire District to administer pre-employment physical and drug screens to me. All screening will be administered at a date and time imposed by the Mt. Angel Fire District. All costs will be incurred by the Mt. Angel Fire District.

Print Name

Applicant Signature

Date