



WE ARE AN EQUAL OPPORTUNITY EMPLOYER

# APPLICATION FOR EMPLOYMENT

DATE:

NAME: Last First Middle Email Address

ADDRESS: Street City State Zip Phone Number

<b>MILITARY SERVICE:</b> Date Entered:	Date Separated	Honorable <input type="checkbox"/> YES <input type="checkbox"/> NO	Rank	Branch	Occupation
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<b>CIRCLE HIGHEST GRADE/YEAR COMPLETED IN SCHOOL</b> 1 2 3 4 5 6 7 8 9 10 11 12	<b>NAME &amp; LOCATION OF HIGH SCHOOL</b>	<b>GRADUATED</b> <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> GED	<b>YEAR DIPLOMA WAS/ WOULD HAVE BEEN GRANTED</b>

<b>SCHOOLS ATTENDED AFTER HIGH SCHOOL OR SPECIAL TRAINING RECEIVED</b>				<b>FIELDS OF STUDY/ TITLES OF SPECIAL COURSES</b>		<b>HOURS COMPLETED</b>		<b>DID YOU GRADUATE?</b>	<b>CERTIFICATE DEGREE EARNED</b>
NAME & LOCATION FROM TO FULL PART MO./YR. MO./YR. TIME TIME						SEM. QTR.			
				MAJOR: MINOR:					
				MAJOR: MINOR:					
				MAJOR: MINOR:					

## PROFESSIONAL (WORK) REFERENCES

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please provide the last four digits of your Social Security Number: \_\_\_\_\_

Will you be able to provide proof of Citizenship *or* an alien registration number and visa permitting work in this country if hired? ☐ YES ☐ NO

By this application and my signature, I authorize you to check the validity of my social security number and other pertinent identification: Initials: \_\_\_\_\_

## EMPLOYMENT DESIRED

1. Positions Desired (preference order): 1. \_\_\_\_\_ 2. \_\_\_\_\_ 3. \_\_\_\_\_

Regular Employ: ☐ YES ☐ NO Part-time Employ: ☐ YES ☐ NO

If seeking temporary employment only, when would you expect to terminate? \_\_\_\_\_

Date you can start: \_\_\_\_\_ Salary/Wage desired: \_\_\_\_\_

2. Are you willing to accept odd (nights, graveyard or weekend) or rotating shifts? ☐ YES ☐ NO

3. Have you ever applied to this company before? ☐ YES ☐ NO If yes, when and where?

4. Which of the following are you able to lift and/or carry for prolonged periods? 20 lbs ☐ YES ☐ NO  
30 lbs ☐ YES ☐ NO 40 lbs ☐ YES ☐ NO 50 lbs ☐ YES ☐ NO 50+ lbs ☐ YES ☐ NO

5. What you have done in the recent past to demonstrate that you can perform the activities in Question 4 above?

6. How many days did you miss from work this past year? \_\_\_\_\_

### SPECIAL SKILLS

Please mark box if you have 3 or more months experience for wages

- ☐ FORKLIFT
- ☐ TRUCK DRIVER
- ☐ LUMBER CHAIN PULLING
- ☐ CUTOFF SAW
- ☐ RESAW OPERATOR
- ☐ PLANER SETUP
- ☐ MOULDER SETUP
- ☐ TIEING FROM MOULDER
- ☐ FINGER JOINT OPERATOR
- ☐ FINGER JOINT OFFBEARER
- ☐ WELDING
- ☐ MAINTENANCE MILLWRIGHT
- ☐ CARPENTRY

### EMPLOYMENT HISTORY PLEASE LIST YOUR EMPLOYERS STARTING WITH YOUR MOST RECENT POSITION.

DATES		NAME & ADDRESS OF COMPANY	TELEPHONE
FROM: MO    YR	TO: MO    YR		
		PRIMARY DUTIES PERFORMED	
		IMMEDIATE SUPERVISOR	REASON FOR LEAVING
DATES		NAME & ADDRESS OF COMPANY	TELEPHONE
FROM: MO    YR	TO: MO    YR		
		PRIMARY DUTIES PERFORMED	
		IMMEDIATE SUPERVISOR	REASON FOR LEAVING
DATES		NAME & ADDRESS OF COMPANY	TELEPHONE
FROM: MO    YR	TO: MO    YR		
		PRIMARY DUTIES PERFORMED	
		IMMEDIATE SUPERVISOR	REASON FOR LEAVING
DATES		NAME & ADDRESS OF COMPANY	TELEPHONE
FROM: MO    YR	TO: MO    YR		
		PRIMARY DUTIES PERFORMED	
		IMMEDIATE SUPERVISOR	REASON FOR LEAVING
EXPLANATION OF SPECIAL SKILLS:			
IN CASE OF EMERGENCY NOTIFY		TELEPHONE	

I HEREBY AUTHORIZE YOU TO CONSULT AND OBTAIN INFORMATION FROM ANY EMPLOYER I AM WORKING OR HAVE WORKED FOR: ☐ YES ☐ NO

I authorize the investigation of all matters which PSI deems relevant to my qualifications for employment, including all statements made in this application and in any attachments or supporting documents. I authorize PSI to request, receive and share with any agent or client employer such information and I release from all liability any persons, such as but not limited to, supervisors or employers supplying it. I also release PSI and any of its agents or client employers from all liability which might result from making the investigations.

If employed, I understand that misrepresentation or omission of facts called for is cause for dismissal. If offered employment, I am also willing to take a physical examination and authorize the doctor or doctors involved to disclose to the prospective employer here and any of its agents or client employers the results of that examination. I agree to comply with the employer's substance abuse program, including drug testing as may be required.

If employed, I agree to conform to the rules of this company, and hereby acknowledge that my employment with the company can be terminated at any time, with or without cause, at the option of either myself or the company. I further understand and acknowledge that nothing contained in any employee handbook or policy statement nullifies or modifies the foregoing employment at will policy.

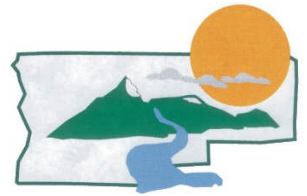
**PLEASE REVIEW APPLICATION FOR COMPLETION. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

DATE: \_\_\_\_\_

APPLICANT'S SIGNATURE: \_\_\_\_\_

# JEFFERSON COUNTY

## HUMAN RESOURCES



66 SE D St, Suite E • Madras, Oregon 97741 • Ph (541) 325-5002 • Fax (541) 325-4454 • [HR@jeffersoncountyor.gov](mailto:HR@jeffersoncountyor.gov)

### Job Announcement

### Summer Work Program - 2025

The Summer Work Program employs those who are graduating this year (2025) from a Jefferson County High School or a Jefferson County High School graduate who (or whose parent(s)/guardian) resides in Jefferson County is currently attending and expects to continue to attend college, university and/or post High School vocational training on a full-time basis during the school year of 2025-2026. The Summer Work Program duties are to perform general labor or clerical tasks to assist any of the following divisions of Jefferson County Government: Buildings & Grounds (includes parks and cemetery), Public Works, Administration, or the Jefferson County Fairgrounds.

#### Program Specifications:

- Applicants must be 18 years of age or older.
- The start date of the Summer Work Program will be no later than June 16, 2025.
- The maximum duration of Summer Work employment will be 90 calendar days.
- A Summer Work participant's schedule may include an alternative workweek, such as Tuesday-Saturday or Sunday-Thursday.
- Time off during the Summer Work Program must be pre-arranged and approved by the Supervisor. Time off during the Summer Work Program cannot exceed five (5) consecutive workdays or 40 total hours.
- Summer Work participants are held to the same standards of conduct as any Jefferson County Employee.
- Jefferson County reserves the right to terminate the employment relationship at any time with or without cause.
- The 2025 Summer Work participants hourly wage is \$18.65 for the first year of employment. If the Summer Work participant is selected to return for succeeding years (2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup>) their hourly wage will increase by 2% from the summer program wage.
- Summer Work participants who have questions or concerns regarding work and other matters, may communicate them to their Supervisor, the Department's Director or the Human Resources Department, [HR@jeffersoncountyor.gov](mailto:HR@jeffersoncountyor.gov).
- Participation in the Summer Work Program is limited to five (5) years.
- Jefferson County will conduct a background check which must be successfully passed to be considered for the 2025 Summer Work Program. Jefferson County is committed to a drug-free environment and applicants may be subject to a pre-employment drug screening.

The application and job packet can be obtained by visiting Mid Oregon Personnel at 213 SW 4<sup>th</sup> Street, Madras, OR. 97741; by calling (541) 475-7640; or by visiting <https://www.midoregonpersonnel.com/madras-office/>.

To apply, you must complete and submit via Mid Oregon website, mail, fax, email or hand deliver all documents which are part of the application packet: (1) **employment application**; (2) **letter of interest**; (3) **supplemental information**; (4) **a current unofficial transcript**; (5) **proof of current classes**; and (6) **proof of Fall 2025 school enrollment (A letter of acceptance, or letter of intent to attend the educational institution will be accepted in lieu of proof of enrollment) to:**

Jefferson County Mid Oregon Personnel  
213 SW 4<sup>th</sup> Street, Madras, OR 97741  
Fax: 541-475-7656

Email address: [Julie@midoregonpersonnel.com](mailto:Julie@midoregonpersonnel.com)  
<https://www.midoregonpersonnel.com/madras-office/>  
**by 5:00 pm on Monday, May 5, 2025**

*(If documents are faxed, you must also mail the original application packet to the address above.)*

**If the applicant can't provide the required documents, they must submit a letter in writing explaining their reasons why. Incomplete application packets will not be considered.**

*Jefferson County is an Equal Opportunity Employer.*

## Jefferson County Summer Work Program Letter of Interest

I, \_\_\_\_\_, would like to participate in the Summer Work Program for 2025 with Jefferson County.

I understand that:

- The start date of the Summer Work Program will be no later than June 16, 2025.
- The maximum duration of Summer Work employment will be 90 calendar days.
- Any time off during the Summer Work Program must be pre-arranged and approved by the Supervisor. **Any time off during the Summer Work Program cannot exceed five (5) consecutive workdays, 40 total hours. The dates leading up to and including annual County Fair will not be granted "time-off" requests.**
- I will be held to the same standards of conduct as any Jefferson County employee.
- A Summer Work participant's work schedule may include an alternative workweek, such as Tuesday-Saturday or Sunday-Thursday.
- Jefferson County reserves the right to terminate the employment relationship at any time with or without cause.
- A 2025 Summer Work participant's hourly wage is \$18.65 for the first year of employment. If a Summer Work participant is returning for succeeding years (2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup>) their hourly wage will increase by 2% for each year.
- If I have questions or concerns regarding work and other matters, I may communicate them to my Supervisor, Department Director or the Human Resources Department, [HR@jeffersoncountyor.gov](mailto:HR@jeffersoncountyor.gov).
- Participation in the Summer Work Program is limited to five (5) years.
- I understand that Jefferson County will conduct a criminal background check which I must successfully pass. I must complete and submit the release forms so I may be considered for the 2025 Summer Work Program.
- To be considered, I must complete and submit via [Mid Oregon/Madras website](https://www.midoregonpersonnel.com/madras-office/), mail, fax or hand deliver all documents which are part of the application packet: **(1) employment application; (2) letter of interest; (3) supplemental information; (4) a current unofficial transcript (5) proof of current classes; and (6) proof of Fall 2025 school enrollment (A letter of acceptance, or letter of intent to attend the educational institution will be accepted in lieu of proof of enrollment) to:**

Jefferson County Mid Oregon Personnel  
213 SW 4<sup>th</sup> Street, Madras, OR 97741

<https://www.midoregonpersonnel.com/madras-office/>

Fax: 541-475-7656

Email address: [julie@midoregonpersonnel.com](mailto:julie@midoregonpersonnel.com)

**by 5:00 pm on Monday, May 5, 2025**

*(If documents are faxed, you must also mail the original application packet to the address above.)*

*If the applicant can't provide the required documents, they must submit a letter in writing explaining their reasons why. Incomplete application packets will not be considered.*

**Incomplete packets will not be considered.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

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# Jefferson County Summer Work Program Supplemental Information

*Note: Falsification of any information will be grounds for dismissal from the program.*

1. I, \_\_\_\_\_, wish to participate in the 2025 Jefferson County Work Summer Program.

I can start on \_\_\_\_\_  
(Date-no later than June 16, 2025)

2. I am attending or plan to attend \_\_\_\_\_  
(Print Name of High School, University or College Institution)

Located at: \_\_\_\_\_  
(City and State)

During: ☐ Spring 2025 ☐ Fall 2025  
*Mark all applicable*

3. To apply, I must complete and submit via [Mid Oregon/Madras website](#), email, mail, fax or hand deliver all documents which are part of the packet:

**(1) employment application (2) letter of interest; (3) supplemental information; (4) a current unofficial transcript (5) proof of current classes and (6) proof of Fall 2025 school enrollment (A letter of acceptance, or letter of intent to attend the educational institution will be accepted in lieu of proof of enrollment)** to support your answers to questions #2 and #3.

4. I can be reached at:

Mail: \_\_\_\_\_  
Indicate if: ☐ Applicant ☐ Parents ☐ Other \_\_\_\_\_

Phone: \_\_\_\_\_  
Indicate if: ☐ Applicant ☐ Parents ☐ Other \_\_\_\_\_

Text Msg: \_\_\_\_\_  
Indicate if: ☐ Applicant ☐ Parents ☐ Other \_\_\_\_\_

Email: \_\_\_\_\_  
Indicate if: ☐ Applicant ☐ Parents ☐ Other \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_