



Position Announcement: Superior Court Clerk

Clallam County Courthouse, headquartered in Port Angeles, Washington, is currently accepting applications to fill the full-time position of Superior Court Clerk. The ideal candidate is accountable to the County Administrator and works with the Board of County Commissioners and Superior Court Judges. The position is Responsible for assuring that all activities of the department are performed in accordance with the Revised Code of Washington.

Competencies are a group of skills or attributes needed to carry out work effectively and efficiently...

If the following competencies best describe who you are, this might be the perfect job for you –

- People Management & Developing Others
- Managing Performance
- Coaching and Mentoring
- Team Building & Empowerment
- Forward Thinking & Managing Change
- Attention to Communication
- Conceptual Thinking
- Conflict Resolution
- Commitment to Excellence

At time of hire, must possess and maintain a valid Washington State driver's license AND have passed a complete background investigation, driving record check, employment history verification, and reference confirmation.

Salary and Benefits

The salary is determined based on experience: Superior Court Clerk is \$6788.01 to \$8270.51 per month. In addition, there is an extensive benefit package that includes medical, dental, vision and disability benefits as well as participation in the PERS Retirement Plan. There are also generous annual employer contributions to a deferred compensation plan and health reimbursement account. This position is FLSA exempt; non-represented.

Application Packet

The following application packet is DUE no later than 4:30 PM on June 26th, 2018 (postmarks accepted).

- Complete application located on www.clallam.net online site.
- Notarized Release of Personal History Form
- Clallam County Request for Driving Record

Main: (360) 417.2396 • **Fax:** (360) 417.2550 • **Web:** www.clallam.net • **Email:** bpeterson@co.clallam.wa.us
223 E. 4th Street, Suite 16 | Port Angeles, Washington 98362



- Confidentiality Agreement

Selected candidates will move to the next stage of the process which will include a panel interview. The application packet may be hand delivered, mailed, or sent by private carrier (i.e., FEDEX, UPS, etc.).

Please address your packet to: Clallam County Human Resources
Attn: Brenda Peterson | 223 E. 4th Street, Suite 16 | Port Angeles, WA 98362

Schedule & Pertinent Information:

Application Beginning Date	June 12 th , 2018
Application Closing Date	June 26 th , 2018
Job Number	2018-35

Position Details

Description of County:

Clallam County lies across the northern portion of Washington's Olympic Peninsula, the northwest corner of the state of Washington. The high mountains, rugged coastlines, deep forest, miles of unspoiled rivers, clean air and water, and mild marine climate offer a most unusual combination of environmental amenities. The County's cultural, educational, and social amenities, along with the wide range of living styles from small town to rural to backwoods, make Clallam County a uniquely desirable place to live and work.

Clallam County is an Equal Opportunity Employer and encourages applications from all persons without regard to race, creed, color, national origin, religion, sex, age, marital status, disability, sexual orientation, or veteran status including disabled veterans of the Vietnam era. Clallam County provides reasonable accommodation to its employees and the public with disabilities, including disabled veterans.

Summary

Direct, plan, organize, and control all activities of the Superior Court Clerk's Department in accordance with statutes of the State of Washington; oversees all department operations including accurate and timely keeping of Superior Court records and liens; custody and delivery of records and exhibits; issuance of court related documents; provide technical and professional advice as appropriate; assure effective and efficient utilization of departmental personnel, funds, materials, facilities and time; accomplish short-term and long-range planning; implement and maintain sound organizational practices; control costs and otherwise direct and control all departmental operations to assure optimum services to the County; perform all related duties as assigned.

Scope of Responsibility

Accountable to County Administrator and works with the Board of County Commissioners and Superior Court Judges. Accountable for the efficient and effective performance of departmental employees engaged primarily in clerical functions; for the preparation of thorough, and timely technical advice, analyses and reports assuring that collection and expenditures of funds are for optimum benefit and service to the County.

Responsible for assuring that all activities of the department are performed in accordance with the Revised Code of Washington. Errors in judgment and performance could have major impact on legal liabilities, public relations and costs. Must apply thorough knowledge of the laws and procedures related to record keeping and appropriate issuance of writs, order etc.; sound knowledge of management and administrative principles and techniques.

Requires close working relationships with other state, county and municipal officials, attorneys, and other County government departments; maintain harmonious working relationships within the Clerks' Office.

Typical Duties

- Responsible to independently plan, assign and carry out administrative programs, projects and services that comply with provision of Washington State Constitution and the Revised Code of Washington. Responsible for record archiving and retention, ensuring public access to records, collection of legal financial obligations, maintaining evidence/exhibits, ensuring timely processing of appeals, Court accounting and funds, maintenance and upgrade of record keeping systems required to support the mandated functions of the Clerk, and maintaining a record of the proceedings of the Court
- Supervise department employees; decide and implement all personnel actions such as hiring, discipline, termination and size and complement of staff; schedule staff for department duties; attend management meetings, seminars and other meetings as required
- Develop and implement standard operating procedures in accordance with statutes
- Supervise all elements of the jury management process in conjunction with statutes, local court rules and in cooperation with the County Auditor, Director of Information Technology and Superior Court Judges, including summoning jurors, dealing with juror requests for excuses and change of terms, monitoring juror attendance, and payment of jurors per diem and mileage
- Perform quasi-judicial duties such as the issuance of warrants, writs and subpoenas; assist citizens in special proceedings involving domestic violence and civil harassment
- Issues notices for Sheriff's sale of real property, and further maintain judgment execution dockets for monetary and real property judgments
- Develop, implement and monitor department budget and short-term and long-range goals and objectives; make final decisions on all purchases, both major and minor, including types of equipment to be used within budgetary limits



- Maintain positive working relationships with elected state and local officials, department heads, the general public and attorneys in a manner consistent with sound public relations techniques
- Perform management functions as described in the attached “Regular Management Responsibilities” for appointed and elected officials

Essential Functions

- Exercise sound judgment in the performance of assigned duties on the basis of law, applicable policies and procedures, and ethical responsibilities
- Prepare clear, concise, coherent, and grammatically correct written work product
- Be attentive to detail
- Work well with others
- Prioritize work assignments
- Operate a variety of office equipment including, but not limited to, computers and installed software applications, bates stamp machines, and multi-line conference phones
- Establish and maintain positive and effective working relationships with those contacted in the course of work

Key Competencies for this Position

- Ethics and Integrity: Respects and maintains confidentiality. Earns trust, respect, and confidence through honesty, forthrightness, and professionalism in all interactions
- Valuing Diversity: Helps create a work environment that embraces and appreciates diversity treats all with acceptance and respect; and values diverse perspectives
- Communication: Effective communication skills to convey thought and information clearly and concisely to a broad audience. Strong writing and editing skills
- Relationship Building: Proven skills to create and maintain effective teams and partnerships
- Multi-tasking: Proven multi-tasking skills with the ability to handle multiple assignments in various stages simultaneously. Ability to work in a fast-paced environment with changing priorities
- Analytical Skills: Analytical skills with exceptional attention to detail

Qualifications

To perform this job successfully, an individual must be able to perform each essential function satisfactorily. The requirements listed below are representative of the knowledge, skills, and/or abilities required. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.



Knowledge of:

Knowledge of the job assignment sufficient to perform thoroughly and accurately the full scope of responsibility as illustrated by examples in the above job description

Knowledge of customer service etiquette

Knowledge of relevant information, including applicable policies, procedures, laws and regulations

Knowledge of specialized terminology

Knowledge of software applications; keyboarding skills (may vary according to position assignment)

Knowledge of appropriate physical standards for computer work such as appropriate seating, arm and/or wrist use

Knowledge of state and local laws regarding record keeping, court procedures, safe custody of records and exhibits

Knowledge of legal terminology and research procedures

Knowledge of program planning

Knowledge of principles of supervision and training

Knowledge of principles of budget preparation and control

Knowledge of modern office procedures, methods and computer equipment including word processing, spread sheet and data base applications

Knowledge of pertinent Federal, State and local laws, codes and regulations

Knowledge of Court

Skill in:

Skill in interpersonal relationships

Skill in organization

Skill in being analytical

Skill in research skills

Skill in problem-solving and troubleshooting

Skill in conflict resolution

Skill in oral and written communications

Skill in word processing, spreadsheets and specialized software programs

Skill in adapting to changes in work load demand

Skill in working on multiple projects simultaneously

Skill in maintaining confidentiality of sensitive matters

Skill in responding to emergencies

Skill in following oral and written instructions

Skill in composing/generating and editing correspondence

Skill in communicating with people of diverse backgrounds

Skill in meeting deadlines

Skill in working in stressful environments

Skill in prioritizing work

Skill in working independently

Skill in working in a team setting

Skill in determining validity of information received

Skill in reading and interpreting applicable documents specific to position assignment

Skill in using 10-key machine by touch (may vary according to position assignment)



Ability to:

Ability to demonstrate competency in required job skills and knowledge
Ability to communicate clearly and effectively, both verbally and in writing, with coworkers, other government agencies, contractors, and the general public
Ability to work independently and as part of a team, coordinating with others to facilitate teamwork
Ability to perform multiple tasks simultaneously under tight deadlines, prioritizing work and managing own time
Apply common sense understanding when carrying out instructions furnished in written or oral form
Ability to learn and apply new skills
Ability to keep abreast of current developments using available resources effectively
Ability to be inquisitive
Ability to be methodical and logical
Ability to demonstrate attention to detail
Ability to demonstrate accuracy and thoroughness at all times
Ability to be organized, showing excellent administrative skills
Ability to select and use appropriate communication methods
Ability to get along well with others
Ability to cooperate in a team environment
Ability to problem solve in a group environment
Ability to confront difficult situations while maintaining objectivity
Ability to keep emotions under control
Ability to establish and maintain effective relations
Ability to exhibit good listening and comprehension
Ability to interpret and apply the RCWs to particular work situations, including State Court Rules and Local Court Rules
Ability to maintain good performance of staff through listening, mediation, common sense and practical abilities
Ability to adequately understand technology that can facilitate bringing the court into the 21st century and fulfillment of the promise of a paperless "court"
Ability to meet attendance standards necessary for successful job performance

Education and Experience Required

Requires knowledge of the field of assignment sufficient to perform thoroughly and accurately the full scope of responsibility as illustrated by examples in the above job description

Education/Training

Bachelor's degree in business administration, public administration, court administration or closely related field preferred. A Court Executive Development Program Certificate (CEDP) from the Institute of Court Management or a Masters in Judicial Administration preferred.

Experience

Five years progressively responsible court management experience, preferably within the State of Washington, with demonstrated management and supervisory responsibility.



Special Requirements

Obtain a Court Management Certificate within three (3) years from date of hire or as soon thereafter as coursework is offered by the Institute for Court Management and to obtain the Court Executive Development Program Certificate (CEDP) within six (6) years from date of hire.

Licensing/Certification Requirements

Washington State Driver's License
U.S. citizenship (selected positions)
Pass polygraph test (selected positions)
Pass Psychological Evaluation (selected positions)
Pass Physical (selected positions)
Drug testing (selected positions)
Pass Background Check
Pass OSHA/Designated Required Training

Note: Any first aid rendered by such persons is rendered only as a collateral duty responding solely to injuries resulting from workplace incidents, generally at the location where the incident occurred.

Physical Demands and Environment

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job.

Primarily office and courtroom setting; attendance at offsite conferences, training and seminars; requires extended sitting and standing; maintaining balance, bending, stooping, reaching, pushing, pulling, twisting; requires sense of touch, finger dexterity, gripping with fingers and hands, lifting and carrying up to 30 pounds; requires ability to hear voice conversations; close, far, side vision with color and depth perception.

The work environment characteristics described here are representative of those an employee encounters while performing the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

High Exposure Designation

The employee assigned to this position may work within a high exposure classification as defined under the Occupational Safety & Health Act and Washington Administrative Code governing Washington Industrial Safety & Health Act for blood borne pathogens protocols.

Essential Worker Designation

The employee assigned to this position is designated as an "essential worker." Essential workers are required by the county to respond and perform work functions during an emergency in order to ensure the protection of the health, safety, and welfare of the citizens of Clallam County and public facilities and property located therein. The county maintains the right to recall essential workers during any emergency and/or as necessary to restore governmental functions during extended emergencies.



Requirement for Confidentiality

The employee assigned to this position works in the capacity of a confidential employee and is required to maintain confidentiality with regard to a broad range of matters including, but not limited to: employee performance, the management of protected health information, and matters protected by the attorney – client privilege. Any breach of this requirement of employment may result in immediate discipline, up to and including termination.

General Disclaimer

The statements contained herein reflect general details as necessary to describe the principal functions of this position, the level of knowledge and skill typically required, and the scope of responsibility, but should not be considered an all-inclusive listing of work requirements. The individual may be directed to perform other duties as assigned including work in other functional areas to cover absences or relief, to equalize peak work periods or otherwise to balance the workload.



CLALLAM COUNTY EMPLOYMENT APPLICATION

Return Completed Application to:
Clallam County Human Resources Department
223 E. 4th St., Suite 16
Port Angeles, WA 98362-3015

***Clallam County is an Equal Opportunity Employer &
Drug Free Workplace***

FOR OFFICE USE ONLY

INSTRUCTIONS FOR COMPLETING THIS APPLICATION

- A separate application must be completed for EACH POSITION for which you are applying. We require the original application
- *Complete the application thoroughly.* Your answers determine whether you will be considered. We will not accept "See Resume." Resumes may be used to supplement an application, but may not be used in lieu of completing the application form. Applications that are incomplete (including "see resume", or do not list references) will not be accepted.
- Be sure to sign your name and enter the date you signed it where the application asks. Original signature is required.
- Keep a copy of your application and any attachments because what you submit will not be returned.
- DO NOT double side the application – double sided applications will not be accepted.
- Clallam County is an Equal Opportunity Employer. If you require a reasonable accommodation to complete the employment application process, please advise a representative in the Clallam County Human Resources Department.

TITLE OF POSITION APPLYING FOR:				DATE		JOB NO.	
FIRST NAME		MIDDLE INITIAL/NAME		LAST NAME			
PHYSICAL STREET ADDRESS			CITY			STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)			CITY			STATE	ZIP CODE
DAY PHONE:		EVENING PHONE:		OTHER PHONE:		PERSONAL EMAIL ADDRESS	
ARE YOU UNDER 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO				LIST PRIOR NAMES KNOWN BY:			
ARE YOU ABLE TO WORK: <input type="checkbox"/> Full-time <input type="checkbox"/> Part time <input type="checkbox"/> Shifts <input type="checkbox"/> Temporary <input type="checkbox"/> On Call							
HAVE YOU BEEN PREVIOUSLY EMPLOYED BY CLALLAM COUNTY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE LIST DEPARTMENT AND DATES Department: _____ Dates: _____							
THERE ARE SOME LIMITATIONS ON THE EMPLOYMENT OF RELATIVES. EACH CASE IS CONSIDERED SEPARATELY FOR POTENTIAL CONFLICTS OF INTEREST. LIST RELATIVES EMPLOYED BY CLALLAM COUNTY: Name: _____ Relationship: _____ Department: _____ Name: _____ Relationship: _____ Department: _____							
HAVE YOU EVER BEEN DEMOTED; DISCHARGED; FIRED; AND/OR ASKED TO RESIGN? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, PLEASE EXPLAIN. _____ _____							
HAVE YOU BEEN CONVICTED OF A CRIME (OTHER THAN A MINOR TRAFFIC INFRACTION) OR SERVED TIME IN PRISON WITHIN THE LAST TEN (10) YEARS? <input type="checkbox"/> YES <input type="checkbox"/> NO. A CONVICTION OF A CRIME WILL NOT NECESSARILY BAR A PERSON FROM EMPLOYMENT. EACH CASE IS CONSIDERED SEPARATELY. ARE YOU CURRENTLY AWAITING CRIMINAL PROSECUTION FOR A MISDEMEANOR (OTHER THAN A MINOR TRAFFIC INFRACTION) OR A FELONY? <input type="checkbox"/> YES <input type="checkbox"/> NO. IF YOU ANSWERED "YES" TO EITHER OR BOTH OF THE ABOVE QUESTIONS, PLEASE PROVIDE THE DETAILS IN THE SPACE BELOW (AND AN ATTACHED SHEET IF NEEDED) AND INCLUDE: (1) DATE; (2) CHARGE, (3) PLACE; AND (4) ACTION TAKEN. _____ _____ _____							
AFTER REVIEWING THE ESSENTIAL FUNCTIONS LISTED IN THE JOB ANNOUNCEMENT, ARE YOU ABLE TO PERFORM THEM WITH OR WITHOUT REASONABLE ACCOMMODATION? <input type="checkbox"/> YES <input type="checkbox"/> NO.							

SKILLS & LICENSES

LIST YOUR SKILLS, CURRENTLY VALID LICENSES, AND CERTIFICATES OR REGISTRATIONS RELATIVE TO THIS POSITION:

EDUCATION

NAME OF SCHOOL (High School, College, Tech School & Vocational Schools)	CITY AND STATE	ATTENDANCE DATES	DEGREE EARNED	DATE	ISSUED UNDER WHAT LAST NAME?

ADDITIONAL INFORMATION:

DRIVER'S LICENSE NO.: _____ STATE ISSUING: _____ EXP DATE: _____

PLEASE COMPLETE THE FOLLOWING: LIST ANY OTHER STATES IN WHICH YOU HAVE HAD A VALID DRIVER'S LICENSE.

STATE	YEARS (TO & FROM)	ISSUED UNDER WHAT NAME

If more space is needed, please attach additional sheets of paper.

LIST STATES OTHER THAN WASHINGTON IN WHICH YOU HAVE RESIDED WITHIN LAST 10 YEARS (include County name & years):

STATE	CORRESPONDING COUNTY	YEARS (TO & FROM)

WORK HISTORY

RESUMES MAY BE ATTACHED BUT WILL NOT BE ACCEPTED AS A SUBSTITUTE FOR COMPLETING THIS SECTION. **BEGINNING WITH YOUR PRESENT OR MOST RECENT EMPLOYMENT**, LIST YOUR WORK EXPERIENCE FOR AT LEAST THE LAST TEN YEARS, INCLUDING PERIODS OF SELF-EMPLOYMENT, U.S. MILITARY SERVICE, UNPAID EXPERIENCE OR VOLUNTEER WORK IF YOU FEEL THAT IT REPRESENTS QUALIFYING EXPERIENCE FOR THE POSITION FOR WHICH YOU ARE APPLYING.

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

IF CURRENTLY EMPLOYED, WHO SHOULD BE CONTACTED REGARDING YOUR CURRENT EMPLOYMENT?
SHOULD WE NOTIFY YOU FIRST? <input type="checkbox"/> YES <input type="checkbox"/> NO

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

WORK HISTORY CONTINUED

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

DATES OF EMPLOYMENT (MONTH/YEAR) FROM: _____ TO: _____	TITLE OF POSITION
SALARY Starting \$ _____ per _____	EMPLOYER NAME
Ending \$: _____ per _____	EMPLOYER ADDRESS
NAME AND TITLE OF IMMEDIATE SUPERVISOR:	AREA CODE AND PHONE NO.:
REASON FOR LEAVING:	DESCRIPTION OF WORK:

NOTE: ATTACH SEPARATE SHEETS, IF NECESSARY. FAILURE TO PROVIDE ALL INFORMATION REQUIRED MAY RESULT IN REJECTION OF APPLICATION.

REFERENCES

LIST THREE INDIVIDUALS NOT RELATED TO YOU WHO CAN PROVIDE JOB-RELATED OR CHARACTER REFERENCE INFORMATION ABOUT YOU. NAME, ADDRESS AND PHONE INFORMATION IS REQUIRED.

1. NAME OF REFERENCE _____ RELATIONSHIP _____

ADDRESS _____

CURRENT PHONE _____
2. NAME OF REFERENCE _____ RELATIONSHIP _____

ADDRESS _____

CURRENT PHONE _____
3. NAME OF REFERENCE _____ RELATIONSHIP _____

ADDRESS _____

CURRENT PHONE _____

AGREEMENT, CERTIFICATION, AND AUTHORIZATION

I HEREBY CERTIFY, UNDER THE PENALTY OF PERJURY IN THE STATE OF WASHINGTON, THAT THIS APPLICATION CONTAINS NO WILLFUL MISREPRESENTATION AND THAT THE INFORMATION GIVEN IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF. I AM AWARE THAT SHOULD INVESTIGATION AT ANY TIME DISCLOSE ANY SUCH MISREPRESENTATION OR FALSIFICATION, MY APPLICATION MAY BE REJECTED, MY NAME MAY BE REMOVED FROM CONSIDERATION OR I MAY BE DISCHARGED FROM MY EMPLOYMENT.

I AUTHORIZE MY CURRENT OR FORMER EMPLOYERS AND ALL SCHOOLS OR EDUCATIONAL AND TECHNICAL INSTITUTIONS WHICH I HAVE ATTENDED TO PROVIDE CLALLAM COUNTY REPRESENTATIVES ANY INFORMATION REGARDING MY CURRENT OR FORMER EMPLOYMENT, SCHOLASTIC RECORDS OR RATINGS. I HEREBY RELEASE ANY SUCH CURRENT OR FORMER EMPLOYERS OR INSTITUTIONS, THEIR AGENTS OR EMPLOYEES FROM ANY AND ALL LIABILITY RESULTING FROM THE RELEASE OF SUCH INFORMATION. MY AUTHORIZATION AND RELEASE FROM LIABILITY ARE KNOWING, INTELLIGENT AND VOLUNTARY ACTS.

I AM WILLING TO SUBMIT TO A PRE-EMPLOYMENT PHYSICAL EXAMINATION, IF REQUIRED.

I UNDERSTAND THAT AS A CONDITION OF EMPLOYMENT I MUST PROVIDE DOCUMENTATION TO PROVE MY ELIGIBILITY TO OBTAIN EMPLOYMENT ALONG WITH PERSONAL IDENTIFICATION INFORMATION AS REQUIRED BY THE IMMIGRATION REFORM AND CONTROL ACT OF 1986.

SIGNATURE OF APPLICANT

DATE

AFFIRMATIVE ACTION INFORMATION
THIS FORM IS A REQUIRED PART OF YOUR APPLICATION

Information as to race, sex, etc. is voluntary, however, it is required that you fill in your name, address and telephone number. Clallam County is an Equal Opportunity Employer. This information will be used for EEO/Affirmative Action purposes only. For an explanation of this County's Affirmative Action Policy, please refer to the information below, Affirmative Action in Clallam County: Information for the Applicant that accompanies this application. A copy of this form and Clallam County's complete Affirmative Action Policy are available from the Clallam County Human Resources, 223 E. 4th St., Suite 16, Port Angeles, WA 98362. Phone: (360) 417-2241.

POSITION APPLIED FOR:		JOB NO.:	
NAME:			
ADDRESS:			
CITY:	STATE:	ZIP:	PHONE:
SEX: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE			
DISABLED: <input type="checkbox"/> NO <input type="checkbox"/> YES If yes, indicate limitations: _____			
REASONABLE ACCOMMODATIONS: If requested, Clallam County will provide reasonable accommodation to disabled applicants. **Please notify the Human Resources Department.			
RACE: (Check one category) <input type="checkbox"/> WHITE - persons of European descent <input type="checkbox"/> BLACK - PERSONS OF African descent as well as Jamaican, Trinidadian and West Indian. <input type="checkbox"/> HISPANIC - persons of Mexican, Puerto Rican, Cuban, Latin American or Spanish descent. <input type="checkbox"/> ASIAN AMERICAN - persons of Japanese, Chinese, Korean, Filipino, Malayan, Thai, Vietnamese, Polynesian, Pakistani, or East Indian descent. <input type="checkbox"/> NATIVE AMERICAN - persons who identify themselves as American Indian, Aleuts, Eskimos or who are known as such by virtue of tribal association and have proper documentation.			
HOW DID YOU HEAR ABOUT THIS JOB? <input type="checkbox"/> Newspaper Ad <input type="checkbox"/> Websites (Which one?): Clallam County Website / Craigslist / Other _____ <input type="checkbox"/> Informed by Clallam County Employee <input type="checkbox"/> Job Board inside the Courthouse			

AFFIRMATIVE ACTION IN CLALLAM COUNTY: INFORMATION FOR THE APPLICANT

The following is a brief explanation of the Clallam County Affirmative Action Policy. It describes--in a very condensed form--the reasons we request the affirmative action information and how that information is used by Clallam County. Most importantly, this supplement describes the safeguards Clallam County uses to protect the information received from the people who will make the hiring decisions.

WHY CLALLAM COUNTY HAS AN AFFIRMATIVE ACTION POLICY . . .

The affirmative action policy exists to provide equal opportunity and treatment to women, minority groups, and all other persons who are employed by or are applying for employment with Clallam County. The information is used to correct the under-utilization of women and members of minorities at all levels of the County's work force. The policy also provides that the County enter into contracts only with equal opportunity employers.

WHAT WE DO WITH THE INFORMATION YOU GIVE US . . .

The information we request of you (sex, age, disability, race, etc.) is used to assist us in determining whether women and minorities are being under-utilized or barred from employment. "Under-utilization" is defined here as having fewer minorities or women working in a particular job classification than one would expect by the number of women and minorities present in our area. We also use the information to comply with any federal and state reporting requirements that inform the government how well we are doing in the recruitment and hiring of women and minorities.

HOW WE KEEP YOUR CONFIDENTIAL INFORMATION CONFIDENTIAL . . .

The data you give us on the "Affirmative Action Information Sheet" is not recorded on any paper which is kept in a personnel file. In addition, it is not made available to anyone who determines your job qualifications. That would be considered an unfair employment practice on the part of the Clallam County. We have developed these procedures to guarantee that these safeguards are in place and are actually implemented:

1. The "Affirmative Action Information Sheet" will be separated from the job application when it is received by an employee designated in the Human Resources Department to receive Clallam County job applications. It will be placed in a separate, confidential file before applications are processed and distributed to the department with the open position.
2. The information is kept in the confidential file until it is needed to implement a corrective employment program, or to consider or accommodate a disability as authorized by federal or state law or regulations. It is also used for statistical information, or to verify the statistics by the County or by the Washington State Human Rights Commission or other concerned governmental agencies. It is not subject to the inquiries or the viewing by any third party, except those administrative federal and state agencies who make a bona fide exception.
3. The data never becomes part of an employee's personnel file.

Clallam County considers any breach or violation of these rules to be sufficient cause for discipline.

If you would like a copy of the complete Clallam County Affirmative Action Policy (Chapter 12 of the Clallam County Uniform Personnel Policies and Procedures) please contact the Clallam County Human Resources Department in person or by mail at the following address: Clallam County Courthouse, 223 E. 4th St., Suite 16, Port Angeles, WA 98362, or call (360) 417-2241.

Clallam County is an Equal Opportunity and Affirmative Action Employer.



CLALLAM COUNTY Request for Driving Record

Completed Form must be Submitted with Application

FIRST NAME	MIDDLE NAME	LAST NAME
------------	-------------	-----------

PLEASE COMPLETE THE FOLLOWING: DO YOU HAVE A VALID DRIVER'S LICENSE? ☐ YES ☐ NO IF YES, PLEASE INDICATE STATE/NUMBER: _____. HAVE YOU BEEN CONVICTED OF ANY MOVING VIOLATIONS OR BEEN INVOLVED IN A VEHICULAR ACCIDENT IN THE LAST 5 YEARS? ☐ YES ☐ NO. IF YES, PLEASE LIST AND EXPLAIN ALL INCIDENTS. INCLUDE ANY NOTICES YOU HAVE RECEIVED SINCE GETTING AN ABSTRACT OF DRIVING RECORD WITHIN THE LAST 6 MONTHS.

STATE	MONTH/YEAR	TYPE OF VIOLATION/EXPLANATION

If more space is needed, please attach additional sheets of paper.

Infractions or citations will not necessary remove you from consideration, but the County will consider your driving record and insurability when making employment decisions.

The information provided above is true to the best of my knowledge. I understand that providing false Information is cause for elimination in the selection process or dismissal from employment.

Signed: _____ **Date:** _____

A Complete Driving Record: For pre-employment purposes, once a *Conditional Offer of Employment* has been made, Applicants need to submit their Driving Abstract to Clallam County Human Resources. Complete driving records may be obtained online from the Washington State Department of Licensing, or at any Washington State Department of Licensing branch office, for a fee of \$13.00. (Other states may have different procedures.) This fee is at the applicant's own expense. We will only accept driving records that are *less than six (6) months old*.

Volunteers: Please note County Volunteers are also expected to submit a Driving Abstract. Refer to the above paragraph for information on where to do so. This fee will be reimbursed by the County. However, you must submit your receipt in order to be reimbursed. Please understand that reimbursement may take up to three weeks.

County Driving Standards:

Applicants for positions in which the occupant is expected to operate a motor vehicle must be at least 18 years old and will be required to present a valid Washington State driver's license with any necessary endorsements. Driving records of applicants may be checked. Applicants may be disqualified from driving on behalf of the County under the following circumstances:

Violations: More than two moving infractions within the preceding three years, or felony, or criminal traffic violations within the preceding five years.



CLALLAM COUNTY

WAIVER AND AUTHORIZATION TO RELEASE PERSONAL HISTORY INFORMATION

TO BE COMPLETED BY APPLICANT AND SUBMITTED WITH APPLICATION
THIS FORM MUST BE NOTARIZED

A complete personal and criminal background investigation will be conducted before hiring and/or volunteering for this position. Your fingerprint record may be checked through the Federal Bureau of Investigation. Therefore, the following information is necessary. Other physical, mental or job-related tests may be required depending upon the position for which you are applying. Proof of name and date of birth is required. *I fully understand that this document, and all information contained herein, is subject to release during the process of collecting information outlined below.*

I CERTIFY THAT THE INFORMATION PROVIDED BELOW IS COMPLETE AND ACCURATE:

NAME: _____

OTHER NAMES KNOWN BY: _____ DATE OF BIRTH: ____/____/____

WAIVER AND AUTHORIZATION TO RELEASE INFORMATION:

TO WHOM IT MAY CONCERN: I, _____, sign this waiver and authorization (or "authorization") knowingly and voluntarily and acknowledge by signing this document I am surrendering certain legal rights I may otherwise hold, such as those provided in federal law at 5 U.S.C. §552(a). I, _____, do hereby authorize a review and full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of Clallam County, whether the said records are of public, private or confidential nature.

I understand that any information obtained by a personal history background investigation that is developed directly or indirectly, in whole or in part, based upon this authorization will be considered in determining my suitability for employment by the Clallam County Human Resources Department. I understand that all materials pertaining to this background investigation become the property of the Clallam County Human Resources Department and I will not have access to any of the background investigation.

I emphasize that the intent of this authorization is to provide full and free access to the background and history of my personal and professional life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Clallam County Human Resources Department to consider in determining my suitability for employment by that Department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be, and to the sources of information specifically identified herein.

The intent of this authorization is to give my consent for full and complete disclosure of the records of educational institutions; financial or credit institutions (including credit reports and/or ratings); employment and pre-employment records, including pre-employment background investigation reports, investigative files, efficiency ratings or other forms of evaluations, complaints or grievances filed by or against me, and salary records; records of complaint, arrest, trial and/or convictions for alleged or actual violations of law, including criminal, civil and /or traffic records; the results of any polygraph examination, records of complaint of a civil nature made by or against me, whatsoever located and to include the records and recollections of attorneys at law, or of other counsel, whether representing me or another person in any case in which I presently have, or have had an interest. I also authorize Clallam County Human Resources Department or its designated agent bearing this release to obtain a certified abstract of my full driving record.

I agree to indemnify and hold harmless any person to whom this request is presented and their agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of their compliance with this request. I also agree to indemnify and hold harmless Clallam County, its agents and employees from and against all claims for damages, losses and expenses, including reasonable attorney's fees, arising out of, or by reason of, release of such information identified in this document. I further understand, the sources of confidential information will not be revealed to me.

* A photocopy of this release form will be valid as an original thereof, even though the said photocopy does not contain an original writing of my signature. The original of this form is maintained at the Clallam County Human Resources Department and will be made available upon request.

This release will expire one (1) year after date of execution and, prior to that time may be deemed irrevocable.

Signature (SIGN IN FRONT OF NOTARY) _____

Date of Execution: _____

Printed Name _____

TO BE COMPLETED BY NOTARY PUBLIC

State of _____)
County of _____)ss

NOTARY SEAL

Subscribed and sworn to before me this _____ day of _____, 20____.

I, the undersigned notary public, do affirm that the above individual has presented valid identification to me.

SIGNATURE OF NOTARY PUBLIC



CLALLAM COUNTY CONFIDENTIALITY AGREEMENT

As an employee or volunteer of Clallam County, I understand that I may have access to "Confidential Information," which includes but is not limited to intelligence information, criminal history information, record information, investigative information, financial information, business practices/strategies, medical records, social security numbers, tax information, payroll, data bases and other sensitive information, regardless of whether such information is expressly designated as "Confidential Information" at the time of its creation. Confidential Information may be in written, electronic or oral form.

I must comply with the following rules to be a volunteer or employee of Clallam County.

1. I will not access or view any Confidential Information, or utilize equipment, other than what is required to do my job.
2. I will not disclose or discuss any Confidential Information with others, including friends or family, unless doing so serves a purpose or function of County government.
3. I understand my personal access code, user ID numbers and passwords used to access County computer systems must not be disclosed and are an essential part of retaining confidentiality unless authorized to do so and permissible by County policy (420).
4. I understand improper disclosure of such information by me, could be a violation of law as well as Clallam County Policy, and I would then be subject to disciplinary action up to and including dismissal, in addition to any civil or criminal penalty provided by law.
5. I will not assist any other person in obtaining or reviewing Confidential Information that the other person is not authorized to obtain or review, and I will immediately report to my department head or direct supervisor any activity that is a violation of this Agreement or any County policy.
6. I will always act in a professional manner with respect to Confidential Information, such that I will not discuss Confidential Information where unauthorized listeners might hear it, nor will I engage in transmitting or repeating gossip or hearsay, knowing that such disclosures could reflect unfavorably on both the County and me.
7. Transportation of Confidential Information shall be done with all County safeguards in place.
8. If I cease employment or volunteer status with the County I will leave in the custody of the County all Confidential Information, regardless of their format.
9. I understand the terms of this Agreement continue to apply after I am no longer a County employee or volunteer.

BY SIGNING THIS DOCUMENT I UNDERSTAND AND AGREE TO THE FOLLOWING:

I HAVE READ THE ABOVE AGREEMENT AND AGREE TO COMPLY WITH ALL OF ITS TERMS. I UNDERSTAND THAT VIOLATION OF THIS AGREEMENT MAY RESULT IN DISCIPLINARY ACTION, UP TO AND INCLUDING DISCHARGE OF EMPLOYMENT AND/OR SUSPENSION AND LOSS OF PRIVILEGES, IN ACCORDANCE WITH CLALLAM COUNTY'S DISCIPLINE POLICY, AS WELL AS LEGAL LIABILITY.

SIGNATURE OF EMPLOYEE/VOLUNTEER: _____

PRINT NAME: _____ DATE: _____

EMPLOYEE RIGHTS AND RESPONSIBILITIES UNDER THE FAMILY AND MEDICAL LEAVE ACT

Basic Leave Entitlement

FMLA requires covered employers to provide up to 12 weeks of unpaid, job-protected leave to eligible employees for the following reasons:

- for incapacity due to pregnancy, prenatal medical care or child birth;
- to care for the employee's child after birth, or placement for adoption or foster care;
- to care for the employee's spouse, son, daughter or parent, who has a serious health condition; or
- for a serious health condition that makes the employee unable to perform the employee's job.

Military Family Leave Entitlements

Eligible employees whose spouse, son, daughter or parent is on covered active duty or call to covered active duty status may use their 12-week leave entitlement to address certain qualifying exigencies. Qualifying exigencies may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, and attending post-deployment reintegration briefings.

FMLA also includes a special leave entitlement that permits eligible employees to take up to 26 weeks of leave to care for a covered servicemember during a single 12-month period. A covered servicemember is: (1) a current member of the Armed Forces, including a member of the National Guard or Reserves, who is undergoing medical treatment, recuperation or therapy, is otherwise in outpatient status, or is otherwise on the temporary disability retired list, for a serious injury or illness*; or (2) a veteran who was discharged or released under conditions other than dishonorable at any time during the five-year period prior to the first date the eligible employee takes FMLA leave to care for the covered veteran, and who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness.*

***The FMLA definitions of "serious injury or illness" for current servicemembers and veterans are distinct from the FMLA definition of "serious health condition".**

Benefits and Protections

During FMLA leave, the employer must maintain the employee's health coverage under any "group health plan" on the same terms as if the employee had continued to work. Upon return from FMLA leave, most employees must be restored to their original or equivalent positions with equivalent pay, benefits, and other employment terms.

Use of FMLA leave cannot result in the loss of any employment benefit that accrued prior to the start of an employee's leave.

Eligibility Requirements

Employees are eligible if they have worked for a covered employer for at least 12 months, have 1,250 hours of service in the previous 12 months*, and if at least 50 employees are employed by the employer within 75 miles.

***Special hours of service eligibility requirements apply to airline flight crew employees.**

Definition of Serious Health Condition

A serious health condition is an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job, or prevents the qualified family member from participating in school or other daily activities.

Subject to certain conditions, the continuing treatment requirement may be met by a period of incapacity of more than 3 consecutive calendar days combined with at least two visits to a health care provider or one visit and

a regimen of continuing treatment, or incapacity due to pregnancy, or incapacity due to a chronic condition. Other conditions may meet the definition of continuing treatment.

Use of Leave

An employee does not need to use this leave entitlement in one block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatment so as not to unduly disrupt the employer's operations. Leave due to qualifying exigencies may also be taken on an intermittent basis.

Substitution of Paid Leave for Unpaid Leave

Employees may choose or employers may require use of accrued paid leave while taking FMLA leave. In order to use paid leave for FMLA leave, employees must comply with the employer's normal paid leave policies.

Employee Responsibilities

Employees must provide 30 days advance notice of the need to take FMLA leave when the need is foreseeable. When 30 days notice is not possible, the employee must provide notice as soon as practicable and generally must comply with an employer's normal call-in procedures.

Employees must provide sufficient information for the employer to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave. Employees also must inform the employer if the requested leave is for a reason for which FMLA leave was previously taken or certified. Employees also may be required to provide a certification and periodic recertification supporting the need for leave.

Employer Responsibilities

Covered employers must inform employees requesting leave whether they are eligible under FMLA. If they are, the notice must specify any additional information required as well as the employees' rights and responsibilities. If they are not eligible, the employer must provide a reason for the ineligibility.

Covered employers must inform employees if leave will be designated as FMLA-protected and the amount of leave counted against the employee's leave entitlement. If the employer determines that the leave is not FMLA-protected, the employer must notify the employee.

Unlawful Acts by Employers

FMLA makes it unlawful for any employer to:

- interfere with, restrain, or deny the exercise of any right provided under FMLA; and
- discharge or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

Enforcement

An employee may file a complaint with the U.S. Department of Labor or may bring a private lawsuit against an employer.

FMLA does not affect any Federal or State law prohibiting discrimination, or supersede any State or local law or collective bargaining agreement which provides greater family or medical leave rights.

FMLA section 109 (29 U.S.C. § 2619) requires FMLA covered employers to post the text of this notice. Regulation 29 C.F.R. § 825.300(a) may require additional disclosures.

