

POSITION APPLIED FOR: _____ NAME _____

LIST BELOW ALL PRESENT AND PAST EMPLOYMENT, BEGINNING WITH YOUR MOST RECENT. ALL TIMES MUST BE ACCOUNTED FOR WHETHER EMPLOYED OR NOT. ATTACH AN ADDITIONAL SHEET IF NECESSARY.

NAME AND ADDRESS OF COMPANY AND TYPE OF BUSINESS	FROM		TO		DESCRIBE IN DETAIL THE WORK YOU DID AND YOUR TITLE	HOURLY STARTING WAGE or SALARY	HOURLY ENDING WAGE or SALARY	REASON FOR LEAVING	NAME, TITLE AND PHONE NUMBER OF YOUR SUPERVISOR
	MO	YR	MO	YR					

Describe in Detail any Specialized Training, Apprenticeships, Computer or Office Equipment Skills, Certifications, Licenses or On-The-Job Training programs you have completed. You may also use this space to tell more about yourself in general.

Licenses and Certifications:

Please list any licenses or certifications held and the dates obtained: (CDL, Skilled Trade License, etc.)

- 1: _____ 4: _____
- 2: _____ 5: _____
- 3: _____ 6: _____

POSITION APPLIED FOR: _____ NAME _____

Related Experience:

Please list the years of work experience you have in any of the following:

Janitor	Maintenance	Handyman	Foreman
Carpenter	Electrician	Painter	Truck/Bus Driver
Finisher (Structure)	Laborer (Semi-skilled)	Mason	CDL licensed?
Plumber	Laborer (Unskilled)	Mechanic	
Clerical	Receptionist	Cashier	Database
Computer Data Entry	Microsoft WORD	EXCEL	POWER POINT
Office Management	Accounting	QuickBooks	Scheduling
Secretarial	Other, please list:		
Travel Agency			

REFERENCES--			
Name: _____	Company: _____	Phone: ____/____/____	
Address: _____		Relationship: _____	
City/ State/ Zip: _____		Known for _____ years	
Name: _____	Company: _____	Phone: ____/____/____	
Address: _____		Relationship: _____	
City/ State/ Zip: _____		Known for _____ years	
Name: _____	Company: _____	Phone: ____/____/____	
Address: _____		Relationship: _____	
City/ State/ Zip: _____		Known for _____ years	

SIGNATURE OF APPLICANT: _____	DATE: _____
-------------------------------	-------------

Thank you for your interest in working for Sequim Senior Activity Center!
All applications will be considered, but not all applicants will be interviewed.
We believe in notifying all applicants by of our decision, whether chosen for an interview or not.
You will be contacted by mail, e-mail, or by phone.

Please attach any additional information you would like us to consider, such as your resume, letters of reference, professional licenses or certificates, etc.

Please read and sign next page also, Applicant's Statement and Condition of Employment.

Sequim Senior Services, a WA non-profit corporation, doing business as Sequim Senior Activity Center is an Equal Opportunity Employer, Tax ID #91-1355592

POSITION APPLIED FOR: _____ NAME _____

APPLICANT'S STATEMENT and CONDITIONS OF EMPLOYMENT

(Please read carefully before signing.)

"I understand that an investigative consumer report involving information concerning my character, employment history, general reputation, police record, personal habits, mode of living, credit and indebtedness may be obtained prior to any final offer of employment. Upon timely written request to the personnel department of the company, the nature and scope of the report will be disclosed to me."

"I certify that the answers given by me in this employment application are true, correct and complete. I agree that the company shall not be liable, in any respect, if my employment is terminated because of misstatements or pertinent omissions made by me in this application. Moreover, I understand that all offers of employment are contingent upon passing the company's prescribed physical examination and drug screen."

"I agree, as a condition of my employment (should I be employed by the Company), to submit to a medical examination if requested and based on the position that I accept or urinalysis test if requested and paid for by the company I further agree to the search or examination of myself or personal property while on the company's premises or while conducting its business elsewhere, I also authorize any company, school, police or security personnel, or other person to give any information regarding my employment, habits, ability, or any other characteristics whatsoever, together with any information they have regarding me whether or not it is in their records. I hereby release all physicians, examiners, companies, schools, or other persons from liability for any damages whatsoever for such testing, examining, or issuing this information. It is agreed and understood that completion of this application does not mean a job opening exists and in no way obligates the company to employ me."

"In the event of employment, I will comply with all company rules and regulations as established from time to time including the company's substance abuse policy. I am willing to work all assigned overtime or other special work assignments as requested by the company. Furthermore, since the company does not offer contracts of employment (unless signed by the President), I understand that nothing contained herein is intended to create a contract between the company and me for either employment or the provision of any compensation or benefits. I understand that I have the right to terminate my employment at any time and likewise, the company has the same right."

"I hereby understand and acknowledge that any employment relationship with this Company is of an "At-Will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time, with or without notice, with or without cause. It is further understood that this "At-Will" employment relationship may not be changed by any written document or by verbal agreement unless such change is specifically acknowledged in writing by an authorized Executive of this Company. I also understand that Sequim Senior Services retains the right to amend, modify, add or delete any or all policies or procedures at its sole and absolute discretion."

"During my employment with Sequim Senior Services, and after my employment ends, I agree not to disclose any confidential or proprietary information regarding operating and trade secrets. I further agree that with respect to any civil litigation involving Sequim Senior Services, in which I am a potential witness and which does not involve an actual or potential claim by me personally, I will not discuss the facts of the case with any third parties without first notifying Sequim Senior Services, or unless a representative or attorney of Sequim Senior Services is present. A copy of this form may be used as the original. The use of results from this form and/or tests will be used for prudent employment decisions."

This application is valid for one hundred eighty (180) days from the application date unless renewed in person or in writing.

SIGNATURE OF APPLICANT: _____ **DATE:** ____/____/____

Applicant E-mail address: _____