

APPLICATION FOR EMPLOYMENT

530 S. Cowley Street, Spokane, WA 99202

WE ARE AN EQUAL OPPORTUNITY EMPLOYER

All qualified applicants are considered regardless of race, color, creed, religion, age, sex, sexual orientation, gender identity and expression, marital status, national origin, veteran status, disability or genetic information.

INSTRUCTIONS - PLEASE READ

This is a general employment application required for all jobs. As the hiring process continues, you may be asked to provide a more detailed survey of your qualifications as they relate to a specific job or an additional authorization for release of information.

PERSONAL INFORMATION		Today's Date	
Last Name		First Name	Initial
Other names used:		Dates used: from to	
Present Street Address			
City		State	Zip
Mailing Address (if different from above)			
City		State	Zip
Home Telephone Number ()	Cell Phone Number ()	Message Phone Number ()	Email Address
Can you provide documentation that you may be lawfully employed in the U.S.? Yes ___ No ___			Are you at least 18 years of age? Yes ___ No ___
Have you applied here before? Yes ___ No ___ If yes, when?		Have you ever been employed by this company before? Yes ___ No ___	
If yes, dates of employment and in what position?			
Do any of your relatives or persons of your same household work here? If yes, please give their names.			
Position applied for:			Date you are available to start:
List other jobs you believe you may be qualified for:			
List any certificates or licenses you hold related to your qualifications for the work you seek:			

PERSONAL INFORMATION (CONTINUED)			
How were you referred to us?		<input type="checkbox"/> Newspaper	<input type="checkbox"/> Website (name)
<input type="checkbox"/> Employee referral (name)	<input type="checkbox"/> Indeed	<input type="checkbox"/> Walk-in	<input type="checkbox"/> Other (explain)
Check if you are willing to accept regular work on:			
<input type="checkbox"/> Full Time	<input type="checkbox"/> Temp/Seasonal	<input type="checkbox"/> Day Shift	<input type="checkbox"/> Night Shift <input type="checkbox"/> Weekends
<input type="checkbox"/> Part Time	<input type="checkbox"/> On Call	<input type="checkbox"/> Evening Shift	<input type="checkbox"/> Variable Shifts
Can you stay late on short notice if required? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you willing to relocate? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Any prior commitments which would require absence of more than a few hours in the next 12 months? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, Please explain:			
Are you now, or do you expect to be engaged in any other business or employment? Yes <input type="checkbox"/> No <input type="checkbox"/>			
If yes, Please explain:			

EDUCATION				
	School Name, City, State	Graduated Y/N	Degree & Major	GPA
High School				
College/Univ.				
College/Univ.				
Trade/Other				
Scholastic honors achieved:				
Are you currently a student? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, school name, course of study, & portion completed:		
Outside activities while in school which you feel reflect your abilities:				
Plans for future education/training:				

EMPLOYMENT HISTORY				Start with PRESENT or most recent employer.			
Name of Organization			Employment Dates (month and year) From _____ To _____				
Type of Business or Industry							
Address		City		State		Zip	
Supervisor Name and Title							
May we contact your current employer? Yes ___ No ___							
Phone Number			Email Address				
Your job title(s)							
Duties of position & skills used:							
Employment Status (FT, PT, contract):							
Reason for leaving							
Name of Organization			Employment Dates (Month and year) From _____ To _____				
Type of Business or Industry							
Address		City		State		Zip	
Supervisor Name and Title							
Phone Number			Email Address				
Your job title(s)							
Duties of position & skills used:							
Employment Status (FT, PT, contract):							
Reason for leaving							
Name of Organization			Employment Dates (Month and year) From _____ To _____				
Type of Business or Industry							
Address		City		State		Zip	
Supervisor Name and Title							
Phone Number			Email Address				
Your job title(s)							

Duties of position & skills used:
Employment Status (FT, PT, contract):
Reason for leaving

VOLUNTEER ACTIVITIES AND EXPERIENCE

Describe your involvement in volunteer activities which may help assess your abilities. Please exclude those activities which may indicate your race, color, creed, religion, age, sex, sexual orientation, gender identity and expression, marital status, national origin, veteran status, disability or genetic information.

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OTHER SKILLS AND QUALIFICATIONS

Please list any other skills, qualifications or experience pertinent to the career you seek. (e.g. - Computers, software, machines, tools, special certifications, etc.)

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REFERENCES

Please do not include family members.

Name	Relationship
Company	
Position/Title	
Phone Number	Email Address
Name	Relationship
Company	
Position/Title	
Phone Number	Email Address
Name	Relationship
Company	

Position/Title	
Phone Number	Email Address

APPLICANT'S STATEMENT

I hereby affirm that the information provided on this application, and accompanying letters or resume, is true and complete.

I also agree and understand that any false or misleading information or significant omissions may disqualify me from consideration for employment or result in my dismissal if hired.

I authorize this employer to investigate my background thoroughly, and agree to assist in such investigation. I release and hold harmless, and promise not to claim damages from any of my prior employers listed above for providing information.

I agree to submit to any drug test that may be required by the employer (if applicable). I understand that the refusal to submit to testing will result in my disqualification for employment with this organization.

I also understand that employment may be conditioned upon an investigation into criminal convictions on record with Local, State or Federal law enforcement authorities.

I understand that, if hired, my employment is not for any specific period or duration and is terminable at will by the employer or me at any time with or without cause or notice. I understand this application is NOT A CONTRACT.

I agree to present documentation proving my eligibility to work in the United States, and that failure to do so voids any offer of employment.

Applicant's Name (please print)

Signature of Applicant

Today's date

EMPLOYMENT APPLICATION
Equal Opportunity Employer

Thank you for your interest in working for us! Please review these important features of our hiring process:

1. Applications are accepted only when an opening within the organization exists.
2. Applications are active for 60 days or until the current hiring process is closed.
3. Applicants may be asked to review information about our mission, our high standards for employees and specific job requirements, and certify your understanding, before applying.
4. Hiring is a two way process - We encourage applicants to ask questions and will do our best to answer them.
5. Due to the volume of applications received, we will not be able to notify each and every applicant not selected. Only those selected for further interviews will be contacted.
6. In some cases, internal candidates are considered alongside external applicants.
7. This application does not guarantee an interview or offer of employment.
8. All job offers may be contingent on satisfactory completion of background investigation, drug screen and a fitness for duty assessment. Job offers are not final until confirmed in writing.
9. Our employees deserve the best co-workers possible. Therefore we reserve the right to hire the best qualified person for the job.

Please initial and date after reading the hiring process above: _____