

Application For Employment

13018 Canyon Rd E, Ste D Puyallup, WA 98373 Phone (253) 863-3881 Fax (253) 863-8436

We are an equal opportunity employer				
We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job related medical condition or handicap, or any other legally protected status.				
(Please Print	·)			
Position(s) Applied For		Date of Applica	ation	
How Did You Learn About Us?		Other:		
Last Name First Name				Middle Name
Address: Number Street City	,		State	Zip Code
Telephone Number(s)	Social Securi	ty Number		
If you are under 18 years of age, can you provide require your eligibility to work? Have you ever filed an application with us before? Have you ever been employed with us before?	d proof of - -		-	:
Are you currently employed?			-	
May we contact your present employer?	-		_	
Are you prevented from lawfully becoming employed in the because of Visa or Immigration Status? Proof of citizenship or immigration status will be required upon employ			-	
On what date would you be available for work?	-		-	
Are you available to work:	-			
Are you currently on "lay-off" status and subject to recall?			-	
Are you willing to accept a position that requires extensiv		-		
Have you ever had any job-related training in the United States Military? If Yes, please describe:				
What wage range are you looking for?	·····	_		
Do you have a valid CDL license? If Yes, what classes or endorsements?				

If No, are you willing to obtain one?

Are you familiar with USDOT commercial driving laws including hours of service logging? If Yes, where did you gain experience?

Are you physically or otherwise *unable* to perform the duties of the job for which you are applying?

Education

	Elementary School	High School	Undergraduate College	Graduate College
School Name and Location				
Years Completed				
Did you receive a Diploma or Degree?				
Describe Course of Study				
What was your Grade Point	Average when you left High	School?	When you left College?	

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Describe any specialized training, apprenticeship, skills, and extra- curricular activities	
Describe any honors you have	
received	
State any additional information you	
feel may be helpful to us in	
considering your application	

Indicate any foreign languages you can speak, read, and/or write.

	Fluent	Good	Fair
Speak			
Read			
Write			

Activities

List professional, trade, business, or civic activities and offices held.

You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry, handicap, or any other protected status.

Hobbies

List any hobbies or other extra-curricular interests.

Business References Give name, address, and telephone number of two references who are *not* related to you and are *not* previous employers.

<u>1.</u> 2.

Personal References

Give name, address, and telephone number of two personal references.

1.

2.

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations which indicate race, color, religion, gender, national origin, handicap, or any other protected status.

Employer		Dates Employed		Work Performed
		From	То	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates E	mployed	Work Performed
		From	То	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				
Employer		Dates Employed		Work Performed
		From	То	
Address				
Telephone Number(s)				
Job Title	Supervisor			
Reason for Leaving				

If you need additional space, please continue on a separate sheet of paper.

Special Skills and Qualifications

Summarize special job-related skills and qualifications acquired from employment or other experience.

Applicant's Statement

I certify that answers given herein are true and complete to the best of my knowledge.

I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

This application for employment shall be considered active for a period of time not to exceed 180 days. Any applicant wishing to be considered for employment beyond this time period should inquire as to whether or not applications are being accepted at that time.

I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.

In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of the employer. By my signature, I attest that I have a clean driving record, am currently drug free, and agree to abide by all company drug testing policies.

Signature of Applicant

Date