

Employment Application

We consider applicants for all positions without regard to race, creed, color, religion, sex, national origin, age, or marital status, the presence of any physical or mental medical condition or disability, or any other legally protected status. If you require accommodation due to a disability in order to complete the application process, please let us know what accommodation you require.

LOCATION: Snohomish Aquatic Center

Position(s) applying for:	Salary/wage desired:		
Full Name:	Social Security Number:		
Address:	City	State	Zip Code
Mailing Address (If different than above):	City	State	Zip Code
Telephone Number ()	Message Phone ()		
If necessary, best time to call you at home is:	Email:		
May we contact you at work? If yes, work number and best time to call ()	<input type="checkbox"/> YES <input type="checkbox"/> NO Time:		
Have you filled an application here before?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, give date.	
Have you ever been employed here before?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, give dates. From: To:	
Under what name?	Reason for leaving?		
Type of employment desired? <input type="checkbox"/> Regular Full Time <input type="checkbox"/> Regular Part Time <input type="checkbox"/> Temporary /Seasonal			
Date available to work?	What days and hours are you available for work?		
If you are under 18, can you furnish a work permit?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
Do you have relatives who work for Snohomish Aquatic Center?	<input type="checkbox"/> YES <input type="checkbox"/> NO	If yes, list names.	
Are you legally eligible for employment in this country?	<input type="checkbox"/> YES <input type="checkbox"/> NO		
(Proof of U.S. Citizenship or immigration status will be required upon employment.)			
Are you able to perform the essential duties of the job for which you are applying, either with or without reasonable accommodation? <input type="checkbox"/> YES <input type="checkbox"/> NO (If you have questions as to what the essential functions are for the position you are applying for, please ask for a copy of the job description).			

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Employment History

List all employers, assignments or volunteer activities, for the past 10 years starting with the most recent. **Do not use a resume as a substitute for this information.** Explain any gaps in employment in "Comments" section below.

Employer	Telephone	From / To
Job Title	Address	
Immediate Supervisor and Title		
Reason for leaving?		
May we contact for references? <input type="checkbox"/> YES <input type="checkbox"/> LATER <input type="checkbox"/> NO		

Employer	Telephone	From / To
Job Title	Address	
Immediate Supervisor and Title		
Reason for leaving?		
May we contact for references? <input type="checkbox"/> YES <input type="checkbox"/> LATER <input type="checkbox"/> NO		

Employer	Telephone	From / To
Job Title	Address	
Immediate Supervisor and Title		
Reason for leaving?		
May we contact for references? <input type="checkbox"/> YES <input type="checkbox"/> LATER <input type="checkbox"/> NO		

Comments

Military History

ACTIVE DUTY DATE	BRANCH OF SERVICE	RATING	GRADE/RANK	TRAINING RELATED TO THE POSITION APPLYING FOR
From To				
From To				

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References

List name and telephone number of three business/work references that are not related to you who have knowledge of your work performance within the last three years. If not applicable, list three school or personal references that are not related to you.

NAME AND RELATIONSHIP	TELEPHONE	YEARS KNOWN

Skills and Qualifications

Summarize special skills and qualifications acquired from employment or other experiences that may qualify you for the position(s) you are applying for. Please attach any resumes or letters of recommendations.

Educational Background

List last three schools attended, beginning with the most recent.

SCHOOLS	NO. YEARS COMPLETED	DEGREE DIPLOMA	MAJOR	MINOR

Trade and Business Associations

List professional, trade, business, or civic associations and any offices held. (Exclude memberships that would reveal sex, race, religion, national origin, age, color, disability or other protected status.)

ORGANIZATION	OFFICES HELD

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Applicant's Statement

Please Read Carefully, Initial Each Paragraph and Sign Below

I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for employment and that the answers given by me are true and correct to the best of my knowledge. I further certify that I, the undersigned applicant, have personally completed this application. I understand that any omission or misstatement of material fact on this application or on any document used to secure employment shall be grounds for rejection of this application or for immediate discharge if I am employed, regardless of the time elapsed before discovery.

Initials: _____

I understand that nothing contained in the application, or conveyed during any interview which may be granted or during my employment, if hired, is intended to create an employment contract between me and the Company. In addition, I understand and agree that if I am employed, my employment is for no definite or determinable period and may be terminated at any time, with or without cause and with or without prior notice, at the option of either myself or the Company, and that no promises or representations contrary to the foregoing are binding on the Company unless made in writing and signed by me and the Company's designated representative.

Initials: _____

I understand that any offer of employment is also contingent upon my ability to provide the documentation required by the Immigration Reform and Control Act of 1986 to substantiate that I am legally authorized to work in the United States.

Initials: _____

I authorize investigation of all statements contained in this application (and accompanying resume, if any). I also authorize the company to contact my present employer (unless otherwise noted in this application form), past employers, and listed references. I hereby authorize and direct my former employers and other persons and organizations referenced in this application to give this company and for this company to receive any and all information concerning my previous employment, education or other information they may have with regard to any of the subjects covered in this application.

Initials: _____

I understand that this company may obtain a consumer report that includes, but is not limited to, my creditworthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, personal interviews, DMV records, any other public records and any other information bearing on my character, general reputation, personal characteristics and trustworthiness. I understand am entitled to copies of any such public records obtained by the Company unless I mark the check box below. If I am not hired as a result of such information, I am entitled to a copy of any such records even though I have checked the box below.

I waive receipt of a copy of any public record described in the paragraph above.

Initials: _____

Signature of Applicant

Date

Criminal History Information Supplement
Child/Adult Abuse Information Act
RCW 43.43.830-43.43.842

Applicant Disclosure

In accordance with Washington State law (RCW 43.43.830) Snohomish Aquatic Center requires applicants to complete this disclosure statement. In addition, applicants who have been offered employment will be required to undergo a state criminal history background check and may be required to undergo a state and national fingerprint background check. This information will be kept confidential.

Name: _____
(print) Last First MI

Social Security Number: _____ Date of Birth: _____

1. Have you ever been convicted of any crime against children or other persons?

- NO
- YES If yes, specify _____

RCW 43.43.830 (5) "Crime against children or other persons" means a conviction of any of the following offenses: Aggravated murder; first or second degree murder; first or second degree kidnapping; first, second, or third degree assault; first, second, or third degree assault of a child; first, second, or third degree rape; first, second, or third degree rape of a child; first or second degree robbery; first degree arson; first degree burglary; first or second degree manslaughter; first or second degree extortion; indecent liberties; incest; vehicular homicide; first degree promoting prostitution; communication with a minor; unlawful imprisonment; simple assault; sexual exploitation of minors; first or second degree criminal mistreatment; endangerment with a controlled substance; child abuse or neglect as defined in RCW 26.44.020; first or second degree custodial interference; first or second degree custodial sexual misconduct; malicious harassment; first, second, or third degree child molestation; first or second degree sexual misconduct with a minor; patronizing a juvenile prostitute; child abandonment; promoting pornography; selling or distributing erotic material to a minor; custodial assault; violation of child abuse restraining order; child buying or selling; prostitution; felony indecent exposure; criminal abandonment; or any of these crimes as they may be renamed in the future.

2. Have you ever been convicted of crimes relating to financial exploitation if the victim was a vulnerable adult?

- NO
- YES If yes, specify _____

RCW 43.43.830 (7) "Crimes relating to financial exploitation" means a conviction for first, second, or third degree extortion; first, second, or third degree theft; first, second, or third degree robbery; forgery; or any of these crimes as they may be renamed in the future.

RCW 43.43.830 (9) "Vulnerable adult" means "vulnerable adult" as defined in chapter 74.34 RCW, except that for the purposes of requesting and receiving background checks pursuant to RCW 43.43.832, it shall also include adults of any age who lack the functional, mental, or physical ability to care for themselves.

3. Have you ever been convicted of crimes related to drugs as defined in RCW 43.43.830?

- NO
- YES If yes, specify _____

RCW 43.43.830 (6) "Crimes relating to drugs" means a conviction of a crime to manufacture, delivery, or possession with intent to manufacture or deliver a controlled substance.

4. Have you ever been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?

- NO
- YES If yes, specify _____

5. Have you ever been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?

- NO
- YES If yes, specify _____

6. Have you ever been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult?

- NO
- YES If yes, specify _____

7. Have you ever been found by a court of law in a protection proceeding under chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult?

- NO
- YES If yes, specify _____

Certification Concerning Criminal History within the State of Washington

I certify, under the penalty of perjury, that the foregoing is true and correct.

Signature

Date

Certification Concerning Criminal History outside the State of Washington

I certify, under the penalty of perjury that I have not been convicted of any of the above-listed crimes or had findings against me concerning the above listed proceedings outside the State of Washington.

Signature

Date

If you cannot so certify, please specify why not: _____

