



**PORT OF WHITMAN COUNTY
APPLICATION FOR EMPLOYMENT**

Position Applying for: _____ Date Available for Work: _____

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle _____
 Address _____ City _____ State/Zip Code _____
 Home Phone _____ Cell Phone _____ Email Address _____
 Social Security Number: _____
 Are you eligible to work in the U.S.? ____ YES ____ NO

EDUCATION

School Name	Location	Years Attended	Degree Received	Major

OTHER SKILLS (Please list any languages, licenses, or relevant trade skills)

EMPLOYMENT (Include all employers in the last five years. Additional pages can be attached if necessary.)

Employer: _____ Dates Employed: _____
 Work Phone: _____ Position: _____ Pay Rate: _____
 Address (include city, state, zip): _____
 Duties Performed: _____
 Supervisor's Name and Title: _____
 Reason for Leaving: _____ May we contact them? ____ YES ____ NO

Employer: _____ Dates Employed: _____
 Work Phone: _____ Position: _____ Pay Rate: _____
 Address (include city, state, zip): _____
 Duties Performed: _____
 Supervisor's Name and Title: _____
 Reason for Leaving: _____ May we contact them? ____ YES ____ NO



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REFERENCES

Name	Title	Company	Phone

ACKNOWLEDGEMENT AND AUTHORIZATION

- _____ I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct 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.
- _____ In the event of employment, I understand that false or misleading information given in my application, resume or interview constitutes a basis for immediate discharge from employment.
- _____ I understand that the position I am applying for is at will employment.

Signature of Applicant

Date and Place