PO Box 1375 Walla Walla, WA 99362 | (509) 529.3543 | www.tristatesteelheaders.com

APPLICATION FOR EMPLOYMENT

Non-Discrimination Policy: Tri-State We do not discriminate on the basis of religion, sexual orientation, gender ider use of a trained dog guide or service a	sex, race, color, creentity, gender expression	d, national origin, m on, veteran or milita	arital status, age,
GENERAL INFORMATION	Date		
Position You Are Applying For:			
Name:			
Last	First	Middle	
Address:			
Number Street	City	State	Zip
Telephone: ()			
E-mail address:			
Referral Source		lou.	
Friend Relative Steelheaders v	website [] Walk-in []	Other	
☐ Internet Search			
Website where you saw the position description	n:		

Employment desired:					
When are you available to start?					
Can you travel locally if a job requires it? ☐ Yes ☐ No					
Are you currently employed? ☐ Yes ☐ No If yes, may we contact your employer? ☐ Yes ☐ No					
If hired, are you legally eligible for employment in the United States? ☐ Yes ☐ No (Proof of legal work status will be required upon employment)					
EDUCATION					
TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE	
High School					
College					
Graduate School					
Bus. or Trade School					
Professional School					
Special Honors					
COMPUTER SKI					
Check off those comput	ter skills with which you a	re proficient (any version).			
☐ PC User ☐ Macintosh User					
☐ Microsoft Excel ☐ Microsoft Publisher ☐ Microsoft PowerPoint ☐ Microsoft Word					
☐ Other Please list					

DRIVER'S LICENSE				
Do you have a driver's license? ☐ Yes ☐ No				
Driver's license number		State of issue		
Expiration date				
OTHER SPECIAL SKILLS				
Please list other special skills you map position for which you are applying, e	ay have, e.g., fluency in other langua etc.	ges, licenses, special training required for the		
WORK EXPERIENCE				
Please list your work experience beginr additional sheets if necessary.	ning with your most recent job. If you v	vere self-employed, give the business name. Attach		
You may attach your resume in	nstead of completing this secti	on. Be sure it includes all information below.		
Current/Most Recent Employer	Dates Employed	Work Performed		
	From:			
	То:			
Address	Supervisor			
Job Title	Reason for Leaving			
Fundamen		I W I D C		
Employer	Dates Employed	Work Performed		
	From:			
	To:			
Address	Supervisor			
/ idd/000	- Supervisor			
Job Title	Reason for Leaving			

Employer	Dates Employed	1	Work Performed
	From:		
	To:		
Address	Supervisor		
Job Title	Reason for Leav	ving	
Employer	Dates Employed	1	Work Performed
Limployer	From:	4	Work i enomied
	FIOIII.		
	_		
	То:		
Address	Supervisor		
Job Title	Reason for Leaving		
REFERENCES			
Please list two references other than rela	tives. Prior emplo	oyers preferred.	References included in resume
Name		Name	_
Title		Title	
Company		Company	
Address		Address	
			-
Telephone		Telephone	
Relationship of reference to applicant:		Relationship of reference to applicant:	
		·	

RELEASE OF INFORMATION (APPLICANT WILL SIGN & DATE)
I,, authorize Tri-State Steelheaders to make
(Print your name)
inquiries of my former employers regarding my past employment record, including dates of employment, salary, performance evaluation, etc., for the purposes of assessing my qualifications for employment.
SIGNATURE: DATE:
SIGNATURE.
WAIVERS AND DISCLOSURES
Please read each section carefully and sign where indicated.
AT-WILL EMPLOYMENT
It is my understanding that this employment application, or the granting of an interview, does not represent a contract of employment or a promise of future benefits by this organization. I understand and agree that, if hired, my employment with Tri-State Steelheaders will be at-will in nature and may be terminated, with or without cause, at any time, by either myself or my employer. I also understand that this written statement supersedes any and all oral representations made by agents or representatives of this organization.
CERTIFICATION OF TRUTH AND ACCURACY
I certify that the information in this application is true, complete and correct. I understand that false answers, statements, or significant omissions made by me on this form shall be sufficient cause for denial of employment or discharge.
NOTIFICATION AND AUTHORIZATION TO CONDUCT BACKGROUND INVESTIGATION
If my application is considered qualified for the position, I understand that I may be subject to a background check, and hereby authorize Tri-State Steelheaders to investigate my background to determine any and all information of concern as to my record, whether same is of record or not, and I release employers and persons named in my application from all liability for any damages on account of his/her furnishing said information.
Additionally, you are hereby authorized to make any investigation of my personal history, educational background, military record, motor vehicle records and/or criminal records through an investigative service of your choice. I authorize the release of this information by the appropriate agencies to the investigating service. This authorization, in original or copy form, shall be valid for this and for any future reports and updates that may be required.
My signature below means that I have read, understand, and agree to the above waivers and disclosures.

PLEASE SIGN HERE: _____ Date _____