

Employment Application

We are an Affirmative Action/Equal Opportunity Employer – M/F/H/V

Volunteers of America provides equal employment opportunities to all applicants for employment without regard to race, sex, age, sexual orientation, marital status, color, creed, religion, national origin, disability, handicap or status as Vietnam-era or special disabled veteran, use of a trained guide dog or service animal by a person with a disability. We are in accordance with applicable federal laws and in compliance with the Americans with Disabilities Act, to include HIV Aids and other communicable diseases covered under the Act. Additionally, the agency complies with state and local laws governing non-discrimination in employment.

First Name: _____ Last Name: _____
 Social Sec. # (optional): _____ Date: ___/___/_____
 Email: _____ Phone1: _____ Phone2: _____

Address: _____
 _____ City _____ State _____ Zip Code _____

Are you a US Citizen or are you registered to work in the US? Y N Are you 18 years of age or older? Y N

Position(s) applied for: _____ Job number: _____

Rate of pay requested \$: _____

Would you work: FT PT Temp Other (list work hours desired): _____

Were you previously employed by us? If yes, when? _____

List any friends or relatives working for us: _____

Have you ever been arrested? Y N If yes, describe: _____
 (This will not necessarily disqualify you)

If we offer you a position, what date would you be available to start? _____

How did you learn about this position? _____

Do you have a valid Washington State driver's license? Y N
 (will not necessarily disqualify you)

If you require any accommodation(s) during your employment interview, please request such in advance of interview.

Record of Education

Type of School	School & Location	Major/Minor Courses	Diploma/Degree
High School / G.E.D.			Graduated or G.E.D.?
Business / Tech. School			
Undergraduate Studies			
Other Professional Licenses, Degrees, or Certificates			
Highest Level of Education Completed			

Military Service Record

Were you in the Armed Forces? Y N

Type of discharge: _____ Branch of service: _____

List duties in the service including special training:

Beginning with your present or most recent employment, list your work/volunteer experience history. Be sure to include any non-paid experience which is related to the job for which you are applying. If additional space is required, attach a separate sheet.

Work / Volunteer History

Employer's Name:	From:	To:
Phone:	Supervisor:	
Position:	Starting Salary:	
Number of employees supervised by you:	Last Salary:	
Primary duties:	Hours worked per week:	
	May we contact the employer? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Reason for leaving:	

Employer's Name:	From:	To:
Phone:	Supervisor:	
Position:	Starting Salary:	
Number of employees supervised by you:	Last Salary:	
Primary duties:	Hours worked per week:	
	May we contact the employer? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Reason for leaving:	

Employer's Name:	From:	To:
Phone:	Supervisor:	
Position:	Starting Salary:	
Number of employees supervised by you:	Last Salary:	
Primary duties:	Hours worked per week:	
	May we contact the employer? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Reason for leaving:	

Employer's Name:	From:	To:
Phone:	Supervisor:	
Position:	Starting Salary:	
Number of employees supervised by you:	Last Salary:	
Primary duties:	Hours worked per week:	
	May we contact the employer? <input type="checkbox"/> Y <input type="checkbox"/> N	
	Reason for leaving:	

References

Name	Phone	Email	Association

Application Agreement

By signing my name and the date in the box below I agree that the facts set forth above in my application are true and complete. I understand that if employed, false statements on this application shall be considered sufficient cause for dismissal. I authorize Volunteers of America Washington to solicit information regarding my character, general reputation, credit, previous employment and similar background information, including a background check through the Washington State Patrol, and to conduct any and all references. I hereby release all parties and persons connected with any such request for information from all claims, liabilities, and damages for any reason arising out of the furnishing of such information. If employed, I release Volunteers of America Washington from any liability for future references it may provide. In consideration of my employment, I agree that my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of either Volunteers of America Washington or myself.

Full Name:

Date:



