

# Share Employment Application

2306 NE Andresen Road  
Vancouver, WA 98661  
(360) 448-2121  
www.sharevancouver.org



Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street City State/Zip

Home Telephone: \_\_\_\_\_ Message Phone: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Position You Are Applying For: \_\_\_\_\_

## EDUCATION

	High School	Vocational	College	Graduate/Professional
School Name & Location:				
(Circle One) Years Completed	9 10 11 12	1 2 3 4	1 2 3 4	1 2 3 4
Diploma/Degree:				
Describe Course of Study:				

Describe any Specialized Training, Apprenticeship or Skills you may have to offer:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How did you hear about this position? \_\_\_\_\_

Do you have any sensory, mental or physical disabilities that would limit your job performance for the position for which you are applying?  YES  NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_

Are you at least 18 years or older:  YES  NO

Have you ever been convicted of a felony within the last seven years?  YES  NO

If yes, explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\* Please note that an affirmative response to the above question will not necessarily bar you from employment.

## EMPLOYMENT HISTORY

Please list present and past employment within the last ten years, beginning with your most recent.

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Employed: From: \_\_\_\_\_ To: \_\_\_\_\_  
Mo/Yr Mo/Yr

Title of Position: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?  YES  NO

Name of Employer: \_\_\_\_\_

Address of Employer: \_\_\_\_\_

Employed: From: \_\_\_\_\_ To: \_\_\_\_\_  
Mo/Yr Mo/Yr

Title of Position: \_\_\_\_\_

Duties: \_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?  YES  NO

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Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?  YES  NO

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Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Last Salary: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

May we contact this employer?  YES  NO

## **Applicant's Certification and Agreement**

I hereby certify that the facts set forth on this Application Form are true and complete to the best of my knowledge. I understand that if I am employed, false or misleading statements given on my application or during my interview may result in my discharge.

I understand that as a condition of my employment with Share I must submit to a background check by the Washington State Patrol. I also understand that if I am hired by Share my employment is conditional based on receipt of this report from the Washington State Patrol.

In addition, I authorize an investigation of statements contained in this application which will allow Share to make an employment decision.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_