

Washington State Employment Application

Most state job opportunities are posted and applied for on careers.wa.gov. Follow the instructions located on the job posting and submit completed application directly to the hiring agency. If a Supplemental Questionnaire is included on the job posting, complete questionnaire and attach.

The State of Washington is an equal opportunity employer. Persons with a disability, who need assistance with their application in an alternative format, call [\(360\) 664-1960](tel:3606641960) or [1-877-664-1960](tel:18776641960). TTY users should first call 711 to access the Washington Relay Service.

General Information

Review all questions carefully before preparing your application.

Position (Job) Title and Agency:

Job Number:

Name (Last, First, and Middle Initial):

Email:

Mailing Address:

City, State, ZIP:

Home Phone

Work Phone

Cell or Message Phone

Promotional Information

Do you currently hold permanent status as a classified employee within the Washington General Service or Washington Management Service?

Yes

No

If **yes**, provide the following:

Personnel Number:

Agency Permanently Employed:

Employment Preferences

Check all types and shifts you will accept:

Type:

Full-Time

Part-Time

Project

Seasonal

Internship

Non-Permanent (temporary)

Shift:

Day

Evening

On-Call

Rotating

Weekends

Night

Education and Training

Have you graduated from high school or passed the GED?

Yes

No

List college, business school, military training, and other relevant education.

1. Present or Last Education:

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

2. Previous Education:

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

3. Previous Education:

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

Employment History

This section must be completed. You may use this form for both volunteer and paid experience. *For volunteer work, 174.3 hours equals one month of experience. If more space is required for employment history, additional pages may be attached.

1. Present or Last Employer:

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours*

Duties

Reason for Leaving

2. Previous Employer:

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours*

Duties

Reason for Leaving

3. Previous Employer:

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours*

Duties

Reason for Leaving

Date and Signature

All answers and statements are true and complete to the best of my knowledge. I understand that the state may verify information, and that untruthful or misleading answers are cause for rejection of this application or dismissal if employed. Electronic applications do not require a signature; you may type in the date and your first and last name.

Signature

Please type your full name in the signature field. Do not use E-sign features or insert signature images. Date