Washington State Employment Application

Most state job opportunities are posted and applied for on <u>careers.wa.gov</u>. 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 or 1-877-664-1960. TTY users should first call 711 to access the Washington Relay Service.

General Information		
Review all questions carefully before	e 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 sta Service or Washington Managemen		the Washington General
Yes	No	
If yes , provide the following:		
Personnel Number:	Agency Permane	ently Employed:

Employment Preferences		
Check all types and shifts you w	ill accept:	
Туре:		
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 s	chool or passed the GED?	
Yes	No	
List college, business school, mi	litary training, and other relevant ed	ucation.
1. Present or Last Education: School Name and Location:		
Months and Years attended		
From:	То:	
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:	То:	
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:	То:	
Credits Earned (Quarter):	Credits Earned (Semester)	Credits Earned (Other)
Major		
Type of Degree Awarded		Year Degree Received

Employment History

1. Present or Last Employer:

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.

Employer's Address:		Employer's Phone:
Dates of Employment:		
From:	То:	
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:	То:	
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:	То:	
Total Months:	Average Hours per Week	
Your Title		Number of Employees Supervised
Immediate Supervisor's Name		Volunteer Hours*
Duties		

Date and Signature	
state may verify information, and that untruthful or	e to the best of my knowledge. I understand that the misleading answers are cause for rejection of this plications do not require a signature; you may type
Signature	Date

Reason for Leaving