

**SKAGIT RIVER SYSTEM COOPERATIVE  
APPLICATION FOR EMPLOYMENT  
(PLEASE PRINT)**

Position Applied for: _____	Date: _____	
How did you learn about us?		
<input type="checkbox"/> Advertisement	<input type="checkbox"/> Friend	<input type="checkbox"/> Walk-in
<input type="checkbox"/> Employment Agency	<input type="checkbox"/> Relative	<input type="checkbox"/> Other

Last Name	First Name	Middle Name				
Address	Number	Street	City	County	State	Zip Code
Telephone Number			Social Security Number			

- Have you ever filed an application with us before?  Yes, date \_\_\_\_\_  No
- Have you been employed with us before?  Yes, date \_\_\_\_\_  No
- Are you currently employed?  Yes  No
- May we contact your present employer?  Yes  No
- Are you authorized to work in the U.S.?  Yes  No  
*Proof of citizenship or immigration status will be required upon employment*

On what date would you be available for work? \_\_\_\_\_

- Are you available to work:  Full time  Part time  Shift work  Temporary
- Are you currently on "lay-off" status and subject to recall?  Yes  No
- Can you travel if required by the job?  Yes  No
- Do you have a valid Driver's License?  Yes # \_\_\_\_\_  No
- Have you ever been convicted of a felony or misdemeanor  Yes  No  
*Conviction will not necessarily disqualify an applicant for employment*

If yes, please explain \_\_\_\_\_

Are you physically or otherwise able to perform the duties of the job for which you are applying?  Yes  No

U.S. Military Service \_\_\_\_\_ Rank \_\_\_\_\_ Years Served \_\_\_\_\_ Branch \_\_\_\_\_

Present membership in National Guard or Reserves: \_\_\_\_\_

What rate of pay would you accept? \_\_\_\_\_ Are you willing to work on weekends? \_\_\_\_\_

Are you a Native American? \_\_\_\_\_ Are you enrolled in a federally recognized Indian Tribe? \_\_\_\_\_ Enrollment # \_\_\_\_\_

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**EDUCATION**

	Elementary School	High School	Undergraduate	Graduate/Professional
School Name and Location				
Years Completed	<input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8	<input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4	<input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4
Diploma/Degree				

Describe Course of Study \_\_\_\_\_

Describe any specialized training, apprenticeship, skills and extra-curricular activities \_\_\_\_\_

Describe any honors you have received \_\_\_\_\_

State any other information you think may be helpful to us in evaluating your application \_\_\_\_\_

List professional, trade, business or civic activities and offices held:

*You may exclude memberships which would reveal sex, race, religion, national origin, age, ancestry or handicap or other protected status*

**EMPLOYMENT EXPERIENCE**

**Start with your present or last job. Include any job-related military service assignments and volunteer activities.**

<b>Employer:</b>	<b>Address:</b>	<b>Telephone #</b>	
Job Title	Supervisor	Length of Service	
Work Performed:			
Reason for leaving		Starting Salary	Final Salary
<b>Employer:</b>	<b>Address:</b>	<b>Telephone #</b>	
Job Title	Supervisor	Length of Service	
Work Performed:			
Reason for leaving		Starting Salary	Final Salary
<b>Employer:</b>	<b>Address:</b>	<b>Telephone #</b>	
Job Title	Supervisor	Length of Service	
Work Performed:			
Reason for leaving		Starting Salary	Final Salary

*If you need additional space, please continue on a separate sheet of paper*

