

Artistic Treeworks

2716 Van Giesen Street
Richland, WA 99354
(509) 943-4604

EMPLOYMENT APPLICATION

Driver's License# _____

State Issued: _____

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Date Available: _____ Social Security No.: _____

Position Applied for: _____ Desired Salary: \$ _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

*The Age Discrimination in Employment Act of 1967 (ADEA) prohibits discrimination on the basis of age with respect to individuals who are at least 40, but less than 70, years of age

Date of Birth*: _____

Have you ever applied to Artistic Treeworks before? YES NO If yes, when? _____

Education

High School: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ City/State: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Communication

What languages do you speak fluently? _____

Read? _____

Write? _____

Previous Employment

(Most Recent First, Ten Years Minimum - Use Back if Necessary)

Company: _____

Address: _____

Street Address

City

State

ZIP Code

Phone: _____ Email: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Comments: _____

Company: _____

Address: _____

Street Address

City

State

ZIP Code

Phone: _____ Email: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference?

YES

NO

Comments: _____

Company: _____

Address: _____
Street Address

City State ZIP Code

Phone: _____ Email: _____

Job Title: _____ Supervisor: _____

Responsibilities: _____

From: _____ To: _____ Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Comments: _____

Drug-Free Workplace

Artistic Treeworks is a drug-free workplace. Do you understand that compliance is a necessary condition of employment, and do you agree to submit to pre-employment drug screening? YES NO

Military Service

Have you ever served in the military? YES NO

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Reserve Status: _____

Physical Record

Do you have any physical limitations that would prevent you from performing any work that you are being considered for? YES NO

If yes, please explain: _____

Have you ever been injured? YES NO

If yes, please explain: _____

Do you have any limitations in: Hearing, Vision, or Speech? YES NO

If yes, please explain: _____

References

Please list three professional references.

Full Name: _____ Relationship: _____

Phone: _____ Years Known: _____

Address: _____

Full Name: _____ Relationship: _____

Phone: _____ Years Known: _____

Address: _____

Full Name: _____ Relationship: _____

Phone: _____ Years Known: _____

Address: _____

Emergency Contacts

Name: _____ Phone: _____

Address: _____

Relation: _____

Name: _____ Phone: _____

Address: _____

Relation: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge, and authorize investigation of all statements contained in this application.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release. Furthermore, I understand and agree that my employment is for no definite period and may, regardless of the payment date of wages, be terminated at any time without previous notice.

Signature: _____

Date: _____