



805 80<sup>th</sup> Street SW, Everett, WA 98203 \*\* (425) 337-2700 \*\* FAX (425) 514-3499

## APPLICATION FOR EMPLOYMENT

WE ARE AN EQUAL OPPORTUNITY EMPLOYER, DEDICATED TO A POLICY OF NON-DISCRIMINATION IN EMPLOYMENT ON ANY BASIS INCLUDING RACE, COLOR, AGE, SEX, RELIGION, OR NATIONAL ORIGIN.

\_\_\_\_\_  
LAST NAME FIRST NAME M.I

\_\_\_\_\_  
CURRENT ADDRESS CITY/STATE

\_\_\_\_\_  
TELEPHONE NUMBER EMAIL ADDRESS

\_\_\_\_\_  
IF LESS THAN 3 YEARS PLEASE PROVIDE PRIOR ADDRESS (USE BACK OF SHEET, IF NEEDED)

\_\_\_\_\_  
POSITION APPLYING FOR: \_\_\_\_\_ DATE: \_\_\_\_\_

HAVE YOU EVER APPLIED OR WORKED AT PACIFIC TOPSOILS BEFORE? \_\_\_\_\_ YES \_\_\_\_\_ NO

ARE YOU SEEKING: FULL-TIME: \_\_\_\_\_ PART-TIME: \_\_\_\_\_ SUMMER EMPLOYMENT: \_\_\_\_\_

DESIRED WAGE: \_\_\_\_\_ DATE AVAILABLE TO START: \_\_\_\_\_ REFERRED BY: \_\_\_\_\_

### EDUCATION:

PROVIDE NAMES OF SCHOOLS, DATES OF ENROLLMENT (EXCEPT FOR HIGH SCHOOL) CITIES AND STATES

### TRAINING:

HAVE YOU COMPLETED ANY TRAINING OR CLASSES RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING FOR? (EXAMPLES: ON-THE-JOB SAFETY TRAINING, MILITARY TRAINING, PRODUCT TRAINING ETC.) BE SPECIFIC.

### SPECIAL SKILLS:

DO YOU HAVE ANY SPECIAL SKILLS OR EXPERIENCES THAT ARE RELEVANT TO THE JOB FOR WHICH YOU ARE APPLYING?

## EMPLOYMENT HISTORY

<b>EMPLOYER:</b> <hr/> <hr/>	<b>NAME OF LAST SUPERVISOR:</b> <hr/>	<b>EMPLOYMENT DATES:</b> To: _____ From: _____	<b>RATE OF PAY:</b> <hr/>
<b>ADDRESS:</b> <hr/> <hr/>	<b>YOUR LAST JOB TITLE:</b> <hr/> <hr/>		<b>REASON FOR LEAVING:</b> <hr/> <hr/> <hr/> <hr/>
<b>PHONE:</b> <hr/> <hr/>			

**DESCRIBE YOUR DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED FOR THIS EMPLOYER:**

<b>EMPLOYER:</b> <hr/> <hr/>	<b>NAME OF LAST SUPERVISOR:</b> <hr/>	<b>EMPLOYMENT DATES:</b> To: _____ From: _____	<b>RATE OF PAY:</b> <hr/>
<b>ADDRESS:</b> <hr/> <hr/>	<b>YOUR LAST JOB TITLE:</b> <hr/> <hr/>		<b>REASON FOR LEAVING:</b> <hr/> <hr/> <hr/> <hr/>
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<b>EMPLOYER:</b>  _____	<b>NAME OF LAST SUPERVISOR:</b>  _____	<b>EMPLOYMENT DATE:</b>  To: _____  From: _____	<b>RATE OF PAY:</b>  _____  <b>REASON FOR LEAVING</b>  _____ _____ _____
<b>ADDRESS:</b>  _____  _____	<b>YOUR LAST JOB TITLE:</b>  _____  _____		
<b>PHONE:</b>  _____			

**DESCRIBE YOUR DUTIES PERFORMED, SKILLS USED OR LEARNED, ADVANCEMENTS OR PROMOTIONS WHILE YOU WORKED FOR THIS EMPLOYER:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**REFERENCES:**

PLEASE LIST REFERENCES WHO CAN PROVIDE US WITH INFORMATION ABOUT YOUR QUALIFICATIONS TO PERFORM THE JOB FOR WHICH YOU ARE APPLYING. BUSINESS OR JOB RELATED REFERENCES PREFERABLE.

NAME	ADDRESS	TELEPHONE	OCCUPATION

**CERTIFICATION**

MY SIGNATURE BELOW CERTIFIES THAT ALL THE INFORMATION IN THIS APPLICATION IS CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT I UNDERSTAND THAT PROVIDING FALSE, INACCURATE, INCOMPLETE OR MISLEADING INFORMATION WILL RESULT IN REFUSAL OF EMPLOYMENT OR TERMINATION OF EMPLOYMENT IF DISCOVERED AFTER DATE OF HIRE. I ACKNOWLEDGE THAT THE COMPANY WILL VERIFY THE ACCURACY AND COMPLETENESS OF THE INFORMATION I HAVE PROVIDED AND I AUTHORIZE ALL ENTITIES AND INDIVIDUALS IDENTIFIED OR DISCOVERED DURING THE COMPANY'S HIRING PROCESS TO PROVIDE INFORMATION REGARDING MY EMPLOYMENT, EDUCATION, CHARACTER OR QUALIFICATIONS. I RELEASE ALL ENTITIES AND INDIVIDUALS WHO PROVIDE INFORMATION IN ACCORDANCE WITH THIS RELEASE FROM ALL LIABILITY FOR ANY DAMAGES THAT MAY RESULT FROM FURNISHING INFORMATION TO THE COMPANY. I UNDERSTAND THAT IF I AM EMPLOYED, I MUST CONFORM TO THE COMPANY'S RULES, POLICIES AND PROCEDURES. I ALSO UNDERSTAND THAT MY EMPLOYMENT IS "AT WILL" WHICH MEANS THAT THE COMPANY OR I MAY TERMINATE EMPLOYMENT AT ANY TIME FOR ANY REASON.

\_\_\_\_\_  
APPLICANT'S SIGNATURE

\_\_\_\_\_  
DATE