



Application for Employment

WASHINGTON HUMANE SOCIETY considers applicants for positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, sexual orientation, or any other legally protected status.

Position(s) Applied For: _____

How Did You Learn About Us?

Advertisement	<input type="checkbox"/>	Friend	<input type="checkbox"/>	Walk-In	<input type="checkbox"/>
Employment Agency	<input type="checkbox"/>	Relative	<input type="checkbox"/>	Other	<input type="checkbox"/>

Last Name: _____ **First Name:** _____ **MI.:** _____

Address: _____

City: _____ **State:** _____

Zip Code _____

Telephone Number(s): _____ **Social Security Number:** _____

Have you ever been employed with us before? yes no

Are you currently employed? yes no

May we contact your present employer? yes no

Are you prevented from lawfully becoming employed in this country because of Visa yes no

or immigration status? 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** **Temp/On-Call**

Are you available to work evening or overnight shifts ___Yes ___No?

Are you currently on "lay-off" status and subject to recall? yes no

Have you been convicted of or pleaded no contest to a felony within the last five years?? yes no

Conviction will not necessarily disqualify an applicant from employment

If yes, please explain: _____

EDUCATION

	Name and Address of School	Course Study	Years Completed	Diploma Degree
High School				
Undergraduate College				
Graduate Professional				
Other (Specify)				

Additional Information

State any additional information you feel may be helpful to us in considering your application. Summarize special

Note to applicants: DO NOT ANSWER THIS QUESTION UNLESS YOU HAVE BEEN INFORMED ABOUT

Are you capable of performing in a reasonable manner the activities involved in the job or occupation for which you

yes no

Employment Experience

Start with your present or last job. Include any job-related military service assignments and volunteer activities. You may exclude organizations, which indicate race, color, religion, gender, national origin, disabilities or other protected status.

1. NAME OF EMPLOYER:	START POSITION	ENDING POSITION	
ADDRESS: _____ _____ _____ FROM: - MO ____ YR ____ TO: - MO ____ YR ____	HOURLY WAGE OR ANNUAL SALARY		
	STARTING	ENDING	NAME AND TITLE OF SUPERVISOR
	_____ ANNUAL _____ANNUAL		
	REASON FOR LEAVING		TELEPHONE NUMBER:
2. NAME OF EMPLOYER:	START POSITION	ENDING POSITION	
ADDRESS: _____ _____ _____ FROM: - MO ____ YR ____ TO: - MO ____ YR ____	HOURLY WAGE OR ANNUAL SALARY		
	STARTING	ENDING	NAME AND TITLE OF SUPERVISOR
	_____ ANNUAL _____ANNUAL		
	REASON FOR LEAVING		TELEPHONE NUMBER:
3. NAME OF EMPLOYER:	START POSITION	ENDING POSITION	
ADDRESS: _____ _____ _____ FROM: - MO ____ YR ____ TO: - MO ____ YR ____	HOURLY WAGE OR ANNUAL SALARY		
	STARTING	ENDING	NAME AND TITLE OF SUPERVISOR
	_____ ANNUAL _____ANNUAL		
	REASON FOR LEAVING		TELEPHONE NUMBER:

References

Please provide (2) professional references and (1) personal reference.

NAME	COMPANY	ADDRESS
ADDRESS (cont'd)	PHONE NUMBER	EMAIL



**VOLUNTARY SELF-IDENTIFICATION
(CONFIDENTIAL-FOR STATISTICAL USE ONLY)**

We are an Equal Opportunity Employer and do not discriminate on the basis of race, color, religion, sex age, national origin, disability, veteran status, sexual orientation or any other classification protected by Federal, state, or local law. The information below will be used only in the compilation of data for Affirmative Action reporting.

Completion of this data is voluntary and will not affect your opportunity for employment, or terms or conditions of employment, if hired. Identification can be declared at any time prior to, or if applicable, after hire. Please return this page with your application.

PLEASE COMPLETE IN FULL:

Date: _____ Position Applied For: _____

Name: _____

Social Security # _____

Sex: (Circle appropriate response) Male Female

ETHNIC GROUP:

(Please check one of the descriptions below corresponding to the ethnic group with which you most identify.)

___ American Indian or Alaskan Native - A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment

___ Asian - A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam

___ Black or African American - A person having origins in any of the Black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

___ Native Hawaiian or Other Pacific Islander - A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands

___ White - A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

___ Hispanic or Latino (All races) - A person of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish culture or origin, regardless of race.

_____ Race missing or unknown - Applies to Applicants only, where a resume or application that is screened is received without any racial or ethnic identification and no further contact is made with the applicant.

VETERAN STATUS:

(Please check one if it describes your veteran status.)

_____ **SPECIAL DISABLED VETERAN:** Means (A) a veteran who is entitled to compensation (or who, but for the receipt of military retired pay, would be entitled to compensation) under laws administered by the Department of Veteran Affairs for a disability rated at 10 or 20 percent in the case of a veteran who has been determined to have a serious employment disability or (B) a person who was discharged or released from active duty because of a service-connected disability.

_____ **VIETNAM ERA VETERAN:** means a veteran, any part of whose active military, naval, or air service, was during the period August 5, 1964 through May 7, 1975 who (1) served on active duty for a period of more than 180 days and was discharged or released there from with other than a dishonorable discharge, or (2) was discharged or released from active duty because of a service-connected disability. No veteran can be considered to be a veteran of the Vietnam era under this paragraph after Dec. 31. 1994.

- Veteran status is may be requested only after post-offer is made.

Personal and Confidential

This page contains sensitive information, store in files, separately from personnel records!