
EDUCATION

High School Education

Last High School Attended: _____

Date of Graduation or GED completion: _____ Highest Grade Completed _____

College, Business, Training Courses or Other Schools Attended:

Name and Location of School	Dates		Type of Degree	Did you Graduate?	Credit Hours Earned		Major
	From	To			Quarter	Semester	

Do you plan further education? ____ Yes ____ No If yes, starting date: _____

Are you currently enrolled in school? ____ Yes ____ No If yes, where? _____

Subjects of special study or research work: _____

Activities other than religious (civic, athletic, etc.) _____

Exclude organizations, the name of which indicates race, age, sex, color or national origin of its members.

MILITARY SERVICE

Were you in the U.S. Armed Forces? ____ Yes ____ No If yes, which branch? _____

Rank at discharge? _____ Dates of Duty: From _____ To _____

EMPLOYMENT HISTORY

List below present and past employment, beginning with the most recent. Attach additional sheets if necessary.

Current or most recent employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		

Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

Previous Employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		

Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

Previous Employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		
Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

PERSONAL REFERENCES

Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____

READ BEFORE SIGNING

I understand that employment with the Port of Skagit County will be on a six (6) month probationary basis. If employed, I will abide by its rules and regulations. I understand that this application is not a contract of employment, not does this application obligate the employer in any way if the employer decides to employ me. Further, I give permission to contact all or any of my previous employers for full information, except those I have requested not be contacted. I also give permission to check my credit history and perform a personal security review. All of the foregoing information I have supplied in this application is a full and complete statement of the facts and it is understood that, if any falsification be discovered, it will constitute grounds for dismissal upon discovery thereof.

Signature of Applicant

Date