

**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*

