



A support network for our youth.

Physical: 227 North 4<sup>th</sup> Street  
Mailing: P.O. Box 217, Mount Vernon, WA 98273  
(360) 336-1610 Fax: (360) 336-0165  
E-mail: info@youthnetnw.net

## Employment Application

Youthnet is an equal opportunity employer and does not discriminate against otherwise qualified applicants on the basis of race, color, religion, sex, national origin, creed, marital status, sexual orientation, age, disabled or Vietnam era veteran status, individuals with a disability, and any other characteristic protected by Federal, State or Local law.

|                   |       |                            |     |
|-------------------|-------|----------------------------|-----|
| Last Name         | First | Middle Initial             |     |
| Street Address    | City  | State                      | Zip |
| Home Phone: _____ |       | Social Security No.: _____ |     |

Are you a U.S. citizen or otherwise authorized to work in the U.S. on an unrestricted Basis? Yes No

Position Applied for: \_\_\_\_\_  
 How did you hear of this opening?: \_\_\_\_\_  
 Date available to start: \_\_\_\_\_

| Education   | School Name & Location | Years Completed | Major | Degree |
|-------------|------------------------|-----------------|-------|--------|
| High School |                        |                 |       |        |
| College     |                        |                 |       |        |
| Other       |                        |                 |       |        |

In addition to your work/education history, are there other skills or qualifications that we should consider?

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Have you ever been convicted of a crime other than a traffic violation? If yes explain: Yes No

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Employment History

List principal positions held. Start with most recent employer. If considered as a final applicant may we contact your current employer? Yes \_\_\_\_\_ NO \_\_\_\_\_

| EMPLOYER | ADDRESS | FROM/TO MO./YR. | SUPERVISOR'S NAME |
|----------|---------|-----------------|-------------------|
| _____    | _____   | _____           | _____             |
| _____    | _____   | _____           | _____             |
| _____    | _____   | _____           | _____             |
| _____    | _____   | _____           | _____             |

State any information about previous work experience, which might be helpful to us: (use additional paper if necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are you related to anyone currently employed at Youthnet?  Yes  No

Name/Relationship \_\_\_\_\_

## Professional References

Give name, address and telephone number of three references that are not related to you.

| Name  | Address | Phone # |
|-------|---------|---------|
| _____ | _____   | _____   |
| _____ | _____   | _____   |
| _____ | _____   | _____   |

I certify that the answers given herein are true and complete to the best of my knowledge. I also authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.

I understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with Youthnet is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge the Employee at anytime with or without cause. Youthnet has made no oral commitments to you. No one at the Youthnet is authorized to make oral commitments regarding employment either now or in the future. It is further understood that this "at will" employment relationship may not be changed by any written documentation or by conduct unless an authorized executive of the organization specifically acknowledges such changes in writing.

In the event you are accepted for work, an official State of Washington criminal background check will be made in regards to any record of convictions that may disqualify you for continued employment with Youthnet.

**Emerson High School Applicants Only:** All school personnel must have proof of fingerprinting and teaching candidates need a Washington State Teaching Certificate.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_