



KING COUNTY BAR  
ASSOCIATION

# KING COUNTY BAR ASSOCIATION EMPLOYMENT APPLICATION

Position Applying For: \_\_\_\_\_ Today's Date: \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_

Current Address:

Street and Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Permanent Address (if different from above):

Street and Apt. # \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

In an emergency, notify: \_\_\_\_\_ (name) \_\_\_\_\_ (telephone)

Are you prevented from becoming employed in the United States because of visa or immigration status?  Yes  No

Are you over the age of 18?  Yes  No

Are you able to perform, with or without accommodation, the essential duties of the job for which you are applying?  
 Yes  No

Have you ever served in the U.S. Military?  Yes  No

If yes, please provide the following information:

Branch of Service: \_\_\_\_\_ Where served: \_\_\_\_\_ Specialty: \_\_\_\_\_

I served from \_\_\_\_\_ to \_\_\_\_\_.

Special Honors:

This company is an equal opportunity employer and does not unlawfully discriminate on the basis of race, sex, age, color, religion, national origin, marital status, veteran status, disability status, or any other basis prohibited by federal, state or local law. Please let us know if you need accommodations in order to participate in the application process.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

## Employment Record

### Present or Most Recent Employer

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Street, City, State, Zip

Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact?  Yes  No  
Name Title

Telephone: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Prior Employer

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Street, City, State, Zip

Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact?  Yes  No  
Name Title

Telephone: \_\_\_\_\_

Reasons for Leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Prior Employer

Employer: \_\_\_\_\_ Address: \_\_\_\_\_  
Street, City, State, Zip

Your Position: \_\_\_\_\_ Salary: \_\_\_\_\_

Duties: \_\_\_\_\_  
\_\_\_\_\_

Dates of Employment: \_\_\_\_\_ to \_\_\_\_\_

Supervisor: \_\_\_\_\_ May we contact?  Yes  No  
Name Title

Telephone: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List Periods of Unemployment of more than 30 days, and explain: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

### Education Record

#### High School

Name \_\_\_\_\_ Address (city, state) \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

If you did not graduate, did you receive your GED?  Yes  No

Special honors or awards: \_\_\_\_\_

#### College or University

Name \_\_\_\_\_ Address (city, state) \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

#### College or University

Name \_\_\_\_\_ Address (city, state) \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

Degree: \_\_\_\_\_ Major: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

#### Other

Name \_\_\_\_\_ Address (city, state) \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

Degree or Certification: \_\_\_\_\_ Specialty: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

#### Other

Name \_\_\_\_\_ Address (city, state) \_\_\_\_\_

Did you graduate?  Yes  No Attended from \_\_\_\_\_ to \_\_\_\_\_.

Degree or Certification: \_\_\_\_\_ Specialty: \_\_\_\_\_

Special honors or awards: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

## Position Specifications

Position Applying For: \_\_\_\_\_ When could you start? \_\_\_\_\_

How did you hear about this job? \_\_\_\_\_

What hours are you willing to work? \_\_\_\_\_

Would you be able to work weekends?  Yes  No Are you willing to travel for the job?  Yes  No

Desired salary: \_\_\_\_\_ per \_\_\_\_\_

## Skills and Licenses

Please describe any skills, licenses or certifications you have in the following areas:

Licenses: \_\_\_\_\_

Computer: \_\_\_\_\_

Languages Spoken (other than English): \_\_\_\_\_

Other skills related to the position sought: \_\_\_\_\_

I certify that the information given above is true and complete to the best of my knowledge. I understand that if I am employed, discovery that I gave false or incomplete information during the application process may result in immediate dismissal.

I further certify that I am not engaged in outside activity or business that could be considered in conflict with KCBA's interest or those of its members, nor will I become engaged in such activity or business if employed.

I authorize KCBA to solicit information regarding my character, general reputation, credit, previous employment and similar background information, and to contact any and all former employers and references I have given on my application. I hereby release anyone connected with any such request for information from all claims, liabilities and damages for any reason arising out of the furnishing of such information. If employed, I release KCBA from any liability for future references it may provide regarding my work history with KCBA.

In consideration of my employment, I agree that my employment and compensation can be terminated with or without cause, and with or without notice at any time, at the option of either KCBA or myself. I understand that no representative of KCBA, other than the Executive Director, has any authority to enter into any agreement for employment for any specified period of time, or to make any agreement contrary to the foregoing.

If employed, I further agree that if KCBA advances any paid leave before it has been accrued, or advances or loans me any money during the course of my employment, or if I lose, damage, or fail to return any KCBA property, KCBA is authorized to deduct from my wages sufficient funds to repay such loans or advances or to replace its property.

Signature: \_\_\_\_\_ Date \_\_\_\_\_ rev. 7/13