JOB APPLICATION

Lewis County Seniors Non-Profit Organization 2545 N National Ave, Chehalis, Washington 98532 360-748-0061



Lewis County Seniors Non-Profit Organization is an equal opportunity employer. This application will not be used for limiting or excluding any applicant from consideration for employment on a basis prohibited by local, state, or federal law. Should an applicant need reasonable accommodation in the application process, he or she should contact the organization's Executive Director for assistance.

Please fill out all of the sections below:

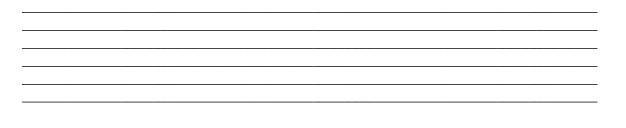
Date of Application:
Applicant Information
Applicant Name:
Address:
City, State and Zip Code:
Telephone Number:
Email Address:
Employment Position
Position(s) applying for:
How did you hear about this position? Website Advertisement Friend
What days are you available for work? Any Week Days Only Weekends Only
What hours or shift are you available for work? Days Evenings Swing
If needed, are you available to work overtime? Yes No
On what date can you start working if you are hired?
Do you have reliable transportation to and from work? Yes No
Are you 18 years of age or older? Yes No
Are you a U.S. citizen or approved to work in the United States? Yes No
Do you have any condition which would require job accommodations? Yes
If yes, please describe accommodations required below:

If yes, please state the nature of the crime(s), when and where convicted and disposition of the case:

(Note: No applicant will be denied employment solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)

Job Skills/Qualifications

Please list below the skills and qualifications you possess for the position for which you are applying:



(Note: Lewis County Seniors Non-Profit Organization complies with the ADA and considers reasonable accommodation measures that may be necessary for eligible applicants/employees to perform essential functions.)

Education and Training

High School	Diplo	oma/GED? Yes	No Year	
Name Location (City, State)			gree? Yes 🗌 No 🛛	
Name Location (City, State)	Year Graduated Deg	gree Earned Vocatio	nal School/Specialized	d Training
Military: Are you a member of the Ar	med Services? Yes] No [] Date	e of Discharge:	
What branch of the military	did you enlist?			
Previous Employment				
Employer Name:				
Job Title: Supervisor Name: Employer Address:				
City,	State	Zip Code:	Phone	
Dates Employed: Job Duties:				

Yes	No
Yes	No
	Yes 🗌

References

Please provide 3 personal and professional reference(s) below:

Reference Contact Information:

Reference #1_ Phone:_	
Reference #1_ Phone:_	

AT-WILL EMPLOYMENT

The relationship between you and the Lewis County Seniors Non-Profit Organization is referred to as "employment at will." This means that you or the Lewis County Seniors Non-Profit Organization can terminate your employment at any time for any reason, with or without cause, with or without notice. No representative of Lewis County Seniors Non-Profit Organization has authority to enter into any agreement contrary to the foregoing "employment at will" relationship. You understand that your employment is "at will," and that you acknowledge that no oral or written statements or representations regarding your employment can alter your at-will employment status, except for a written statement signed by you and either the Executive Director or a Human Resource Committee member.

Applicant Signature:_____

Dated:_____