



Address: 232 Second Ave S, Suite 201, Kent, Washington 98032
 Tel: 253-859-0300 Fax: 253-859-0745 TDD: 253-859-0300

APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT QUESTIONNAIRE

It is the policy of Kent Youth and Family Services to provide employment, training, compensation, promotion, and other conditions of employment based on qualifications without regard to race, color, national origin, gender, age, marital status, sexual preference, and/or disability. Any person requiring ADA accommodations should advise KYFS of the need.

Position Applied For: _____ Salary Desired: _____ When can you begin? _____

PERSONAL DATA

PERSONAL DATA			
Last Name:	First Name:	MI:	
Address:	City:	State:	Zip:
E-Mail Address:	Phone Number:	Phone Number:	

EDUCATION

Type of School	School	City, State	Course Major	Degree/Date
Secondary/High School				
Business or Technical				
Undergraduate Studies				
Graduate Studies				
Other Courses/Training				

Have you ever applied to this agency before? Yes No Have you ever worked for this agency before? Yes No

Who referred you to this agency? _____

Can you perform the essential job duties and responsibilities of the position for which you are applying as listed in the job description, with or without reasonable accommodations? Yes No

Are you over 18 years old? Yes No

Are you a U.S. Citizen **or** otherwise authorized to work in the U.S. on an unrestricted basis? Yes No

Are there any hours, shifts or days you cannot or will not work? _____

Do you have access to a vehicle for work purposes (if job requirement)? Yes No

KNOWLEDGE, SKILLS & ABILITIES (one entry per box)

Applicable Licenses:
Subjects of special study or research work:
Special training:
Special skills:

CRIMINAL RECORD

Kent Youth & Family Services is mindful of its obligation to employ qualified persons. It also considers an applicant's conviction record as it relates to job performance as entitled under the law. A conviction record will not disqualify you for employment unless such record would reasonably affect your fitness for the position for which you have applied. Kent Youth & Family Services will perform background checks with the Washington State Patrol on all applicants. The following questions must be answered by all applicants in order for this application to be considered complete.

Have you been convicted of a felony or released from prison within the last five (5) years? Yes No

If yes, explain: _____

Checking "yes" to the above question will not automatically disqualify the applicant. Kent Youth & Family Services reserves the right to review convictions for relevancy to the job.

APPLICATION FOR EMPLOYMENT

U.S. MILITARY SERVICE			
Branch of Service:	Date In:	Date Out:	Rank & Type of Service:
Training / Experience Received:			

WORK HISTORY				
Most Recent Employer Name:		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From:	Employed To:
City:	State:	Starting Salary:	Last Salary:	
Employer Phone:		Supervisor:		
Position Title:		Hours/week:	Employees Supervised:	
Reason for Leaving:				
Primary Duties:				

Employer Name:		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From:	Employed To:
City:	State:	Starting Salary:	Last Salary:	
Employer Phone:		Supervisor:		
Position Title:		Hours/week:	Employees Supervised:	
Reason for Leaving:				
Primary Duties:				

Employer Name:		May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No	Employed From:	Employed To:
City:	State:	Starting Salary:	Last Salary:	
Employer Phone:		Supervisor:		
Position Title:		Hours/week:	Employees Supervised:	
Reason for Leaving:				
Primary Duties:				

APPLICANT'S SIGNATURE

IMPORTANT: The following must be filled out in full and signed before this application is considered complete.

I verify that I have read and fully understand the job description and application form. Yes No

I swear or affirm that all statements in this application are true and correct to the best of my knowledge. I understand that falsification of information on this application may be cause for elimination from the selection process and dismissal from employment, if hired.

I authorize investigation of all statements contained herein and the references and employers listed above to give you any and all information concerning my previous employment and any pertinent information they may have, personal or otherwise and release the company from all liability for any damage that may result from utilization of such information.

Applicant Signature

Date



APPLICANT DEMOGRAPHIC INFORMATION FORM

We are an equal opportunity employer. In compliance with government regulations we are required to track the number of our applicants by gender, race/ethnicity, and position for which applied.

We ask you to indicate your gender and race/ethnicity below. This information will be kept separately from your application and will be used only in accordance with federal and state regulations.

YOU ARE NOT REQUIRED TO PROVIDE THIS INFORMATION. Your application for employment will be considered in the same manner whether or not you fill out this form.

GENDER

- Male
- Female
- Genderqueer
/Non-Binary

RACE/ETHNIC GROUP

- American Indian/Alaskan Native
- Asian/Pacific Islander
- Black/African American
- Hispanic/Latino
- White
- Multiple Races

Name: _____ Date of Application: _____

Position Applied For: _____

How did you learn about the position?

- Government Employment Agency
- School
- Current Employee
- Private Employment Agency
- Other _____
- Advertisement located in _____

(253) 859-0300 FAX (253) 859-0745 TDD (253) 859-030

