

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 QUESTIONAIRE

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: _	on Applied For: When can you begin?								
		PERS	SONAL DAT	ГА					
Last Name:			First Name:				MI:		
Address:			City:		State:	Zip:			
E-Mail Address:	Mail Address: Phone Nu				Phone N	Phone Number:			
T 60 1 1	<u> </u>		DUCATION						
Type of School	School	City, St	ate	Course Major		Degree/Da	te		
Secondary/High School									
Business or									
Technical Undergraduate									
Studies									
Graduate Studies									
Other									
Courses/Training									
Can you perform the es with or without reasona Are you over 18 years of Are you a U.S. Citizen Are there any hours, shi Do you have access to a	ble accommodations' bld? Yes No or otherwise authoriz ifts or days you cannot	? Yes No need to work in the out or will not work	U.S. on an u	nrestricted basis?		Ų.	description,		
	KNOWL	EDGE, SKILLS	& ABILITI	IES (one entry per b	ox)				
Applicable Licenses:		,		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	,				
Subjects of special stud	y or research work:								
Special training:									
Special skills:									
		CRIM	INAL RECO	ORD					
Kent Youth & Family Service as entitled under the law. A c you have applied. Kent Youth The following questions must	onviction record will not d n & Family Services will p	on to employ qualified lisqualify you for empl erform background ch	l persons. It also oyment unless s ecks with the W	considers an applicant's couch record would reasonal ashington State Patrol on a	bly affect your				
Have you been convicted	ed of a felony or relea	ased from prison w	vithin the last	t five (5) years?	Yes No)			
If yes, explain:									
Checking "yes" to the a	bove question will no	ot automatically di	isqualify the	applicant. Kent Yout	h & Family	Services reserv	es the right		

to review convictions for relevancy to the job.

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	U.S. MILITARY SERVICE										
Branch of Service:	Date In:	Date Out:		Ranl	Rank & Type of Service:						
Training / Experience Received:											
WORK HISTORY											
Most Recent Employer Name:		May we contact this emplo			? Employed From: Employed To						
Street Address:	City, State:			Zip Cod	e:						
Employer Phone:		Supervisor:									
Position Title:		Hours/week:		Employees Supervised:							
Reason for Leaving:											
Primary Duties:											
Employer Name:		May we d	contact this employ No	yer?	Employed From:	Employed To:					
Street Address:	City, State:			Zip Cod	e:						
Employer Phone:		Supervisor:									
Position Title:	1	Hours/week:		Employees Supervised:							
Reason for Leaving:			l		1						
Primary Duties:											
Employer Name:		May we o	contact this employ No	yer?	Employed From:	Employed To:					
Street Address:	City, State:	<u> </u>		Zip Code	e:						
Employer Phone:		Supervisor:									
Position Title:		1	Hours/week:		Employees Supervised:						
Reason for Leaving:			L		l						
Primary Duties:											
APPLICANT'S SIGNATURE											
IMPORTANT: The following must be fil	led out in full and	d signed before	e this application	is consid	lered complete.						
I verify that I have read and fully understa											
I swear or affirm that all statements in this of information on this application may be											
I authorize investigation of all statements information concerning my previous empl company from all liability for any damage	loyment and any p	pertinent info	mation they may	have, per							
Applicant Signa	Date										