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**EDUCATION**

## High School Education

Last High School Attended: \_\_\_\_\_

Date of Graduation or GED completion: \_\_\_\_\_ Highest Grade Completed \_\_\_\_\_

College, Business, Training Courses or Other Schools Attended:

Name and Location of School	Dates		Type of Degree	Did you Graduate?	Credit Hours Earned		Major
	From	To			Quarter	Semester	

Do you plan further education? \_\_\_\_ Yes \_\_\_\_ No                      If yes, starting date: \_\_\_\_\_

Are you currently enrolled in school? \_\_\_\_ Yes \_\_\_\_ No    If yes, where? \_\_\_\_\_

Subjects of special study or research work: \_\_\_\_\_

Activities other than religious (civic, athletic, etc.) \_\_\_\_\_

Exclude organizations, the name of which indicates race, age, sex, color or national origin of its members.

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**MILITARY SERVICE**

Were you in the U.S. Armed Forces? \_\_\_\_ Yes \_\_\_\_ No    If yes, which branch? \_\_\_\_\_

Rank at discharge? \_\_\_\_\_ Dates of Duty: From \_\_\_\_\_ To \_\_\_\_\_

## EMPLOYMENT HISTORY

List below present and past employment, beginning with the most recent. Attach additional sheets if necessary.

Current or most recent employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		
_____		
Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

Previous Employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		
_____		
Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

Previous Employer:

Position/Job Title: _____		
Company Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
Telephone: (____) _____	Hours per week: _____	
Start Date: _____	Starting Pay: \$ _____	(Hour) (Month) (Year)
End Date: _____	Ending Pay: \$ _____	(Hour) (Month) (Year)
Supervisor: _____	Title: _____	
Description of Duties: _____		
Reason for Leaving: _____		
May we contact this employer? _____ Yes _____ No		

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**PERSONAL REFERENCES**

Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____
Name: _____	Telephone: _____	
Address: _____		
City: _____	State: _____	Zip Code: _____

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**READ BEFORE SIGNING**

I understand that employment with the Port of Skagit County will be on a six (6) month probationary basis. If employed, I will abide by its rules and regulations. I understand that this application is not a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me. Further, I give permission to contact all or any of my previous employers for full information, except those I have requested not be contacted. I also give permission to check my credit history and perform a personal security review. All of the foregoing information I have supplied in this application is a full and complete statement of the facts and it is understood that, if any falsification be discovered, it will constitute grounds for dismissal upon discovery thereof.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date