



SEAVIEW BOATYARD, INC.

SEAVIEW WEST: 6701 Seaview Avenue NW, Seattle, WA 98117

Phone: (206) 783-6550

Fax: (206) 789-0092

SEAVIEW NORTH: 2652 Harbor Loop Dr., Bellingham, WA 98225

Phone: (360) 676-8282

Fax: (360) 676-8285

SEAVIEW FAIRHAVEN: 805 Harris Ave, Bellingham, WA 98225

Phone: (360) 594-4314

Fax: (360) 594-4315

EMPLOYMENT APPLICATION

Programs, services, and employment are equally available to everyone. Please inform the Human Resources Department if you require reasonable accommodation for the application or interview.

Date of Review

/ /

APPLICANT DATA:

How were you referred to us:

Position Applied For:

Date Available to Start:

/ /

Full Name:

Address:

City:

State:

Zip:

Phone: ()

Cell:

Email:

Social Security #:

DOB:
Optional / /

Salary Requirement:

Have you ever worked for this company? Yes No

If yes, when?

Are you a citizen of the United States? Yes No

If not, are you legally allowed to work in the United States? Yes No

Type of employment desired: Full-Time Part-Time Temporary Seasonal

Driver's license number if applicable to position:

State:

SUMMARIZE YOUR SPECIAL SKILLS AND/OR QUALIFICATIONS

PREVIOUS EMPLOYMENT

Dates of Employment: From: / / To: / / Position Held:

Company Name:

Address:

Phone: ()

Supervisor:

Title:

Responsibilities:

Starting Wage & Title:

Ending Wage & Title:

Reason for Leaving:

May we contact this employer for a reference: Yes No

PREVIOUS EMPLOYMENT

Dates of Employment: From: / / To: / / Position Held:

Company Name: Address:

Phone: () Supervisor: Title:

Responsibilities:

Starting Wage & Title: Ending Wage & Title:

Reason for Leaving:

May we contact this employer for a reference: Yes No

Dates of Employment: From: / / To: / / Position Held:

Company Name: Address:

Phone: () Supervisor: Title:

Responsibilities:

Starting Wage & Title: Ending Wage & Title:

Reason for Leaving:

May we contact this employer for a reference: Yes No

I certify that my answers are true and complete to the best of my knowledge. I authorize you to make such investigations and inquiries of my personal, employment, educational, financial and other related matters as may be necessary for an employment decision. I hereby release employers, schools or individuals from all liability when responding to inquiries in connection with my application.

In the event I am employed, I understand that false or misleading information given in my application or interview(s) may result in discharge.

Signature of Applicant:

Date:

Office Use: