

# Washington State Employment Application

Most state job opportunities are posted and applied for on [careers.wa.gov](https://careers.wa.gov). Follow the instructions located on the job posting and submit completed application directly to the hiring agency. If a Supplemental Questionnaire is included on the job posting, complete questionnaire and attach.

The State of Washington is an equal opportunity employer. Persons with a disability, who need assistance with their application in an alternative format, call [\(360\) 664-1960](tel:3606641960) or [1-877-664-1960](tel:18776641960). TTY users should first call 711 to access the Washington Relay Service.

## General Information

Review all questions carefully before preparing your application.

Position (Job) Title and Agency:

Job Number:

Name (Last, First, and Middle Initial):

Email:

Mailing Address:

City, State, ZIP:

Home Phone

Work Phone

Cell or Message Phone

## Promotional Information

Do you currently hold permanent status as a classified employee within the Washington General Service or Washington Management Service?

Yes

No

If **yes**, provide the following:

Personnel Number:

Agency Permanently Employed:

## Employment Preferences

Check all types and shifts you will accept:

### Type:

Full-Time

Part-Time

Project

Seasonal

Internship

Non-Permanent (temporary)

### Shift:

Day

Evening

On-Call

Rotating

Weekends

Night

## Education and Training

Have you graduated from high school or passed the GED?

Yes

No

List college, business school, military training, and other relevant education.

### 1. Present or Last Education:

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

**2. Previous Education:**

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

**3. Previous Education:**

School Name and Location:

Months and Years attended

From:

To:

Credits Earned (Quarter):

Credits Earned (Semester)

Credits Earned (Other)

Major

Type of Degree Awarded

Year Degree Received

## Employment History

This section must be completed. You may use this form for both volunteer and paid experience. \*For volunteer work, 174.3 hours equals one month of experience. If more space is required for employment history, additional pages may be attached.

### 1. Present or Last Employer:

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours\*

Duties

Reason for Leaving

**2. Previous Employer:**

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours\*

Duties

Reason for Leaving

**3. Previous Employer:**

Employer's Address:

Employer's Phone:

Dates of Employment:

From:

To:

Total Months:

Average Hours per Week

Your Title

Number of Employees Supervised

Immediate Supervisor's Name

Volunteer Hours\*

Duties

Reason for Leaving

## Date and Signature

All answers and statements are true and complete to the best of my knowledge. I understand that the state may verify information, and that untruthful or misleading answers are cause for rejection of this application or dismissal if employed. Electronic applications do not require a signature; you may type in the date and your first and last name.

Signature

*Please type your full name in the signature field. Do not use E-sign features or insert signature images.*      Date