

Bainbridge Island Metropolitan Park and Recreation District

Position Applied For:	
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Employment Application

Applicant Information											
Full Name:							Da	ate:			
Addross:	Last	First				М.					
Address:	Street Address					Ар	eartment/U	nit #			
	City					Sta	ate	ZIP Co	ode		_
Phone: ()		E-ma	il Address	: _						
Date Availab		you have a ver's License?	☐ Ye] No	Driver's I					
		VEO	NO	or a crime	involv	een convicted ing dishonest			VEC	NO	
Are you auth	norized to work in the U.S.		NO 	vulnerable	e perso	on?			YES	NO	
Have you ev	er worked for this compar	ıy? 🔲	NO	If yes, when?							
Birth Date if of age:	under 18 years										
			Edu	ıcation							
High School	:	Ac	ddress								
From:	To:	Did you gra	duate?	YES	NO	Degree:	-				
College:		Ad	ddress		NO						
From:	To:	Did you gra	duate?	YES	NO	Degree:					
Other:		Ad	ddress:								
From:	To:	Did you gra	duate?	YES	NO	Degree:					
			Refe	erences							
Full Name:			_	Relations	ship:						
Company:						_ Phone:	()			
Address:											
Full Name:				Relations	ship: _						
Company:						_ Phone:	_()			
Address:											
Full Name:				Relations	ship:						
Company:						_ Phone:	_()			_
Address:											

	Previous Employ	yment
Company:		Phone: _()
Address		
Address:		Supervisor:
Job Title:		
Responsibilities:		
From: To: F	·	
May we contact your previous supervisor for a re	eference?	NO
Company:		Phone: ()
Address:		Supervisor:
Job Title:		
Responsibilities:		
May we contact your previous supervisor for a re	YES	NO
Company:		Phone: _()
Address:		Supervisor:
Job Title:		
Responsibilities:		
From: To: F		
May we contact your previous supervisor for a re	YES eference?	NO
	Military Service	ice
Branch:		From: To:
Rank at Discharge:		Type of Duties:
	Disclaimer and Sig	gnature
I certify that my answers are true and complete	te to the best of mv k	knowledge.
	erstand that false or r	misleading information in my application or interview
Signature:		Date: