

# KEY PEN PARKS

P.O. Box 70 • Lakebay, WA 98349  
253-884-9240 • answers@keypenparks.com

## APPLICATION FOR EMPLOYMENT

Thank you for your interest in the Key Peninsula Metropolitan Parks District (DBA-Key Pen Parks) as an employer. Only final candidates for posted openings will be contacted personally by the Parks office. All other applications will remain on file for six months for future consideration. Key Pen Parks is an equal opportunity employer.

### Position Applied For:

General Information							
Last Name		First Name		Middle Initial			
Street Address		City		State		Zip	
Home Phone ( ) -		Work Phone ( ) -		Message Phone ( ) -		Cell Phone ( ) -	
Are you now or have you ever been employed by the Key Pen Parks? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, which position: _____ Dates of Employment: _____							
Do you have relatives working for the Key Pen Parks? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please provide name: _____							
Key Pen Parks is mindful of its obligation to employ qualified persons and its entitlement under law to consider an applicant's conviction record as it relates to the job. <i>A conviction record will not disqualify you for employment UNLESS such record would reasonably affect your fitness for the job for which you have applied.</i> Have you ever been convicted of a felony or released from prison within the last ten (10) years or have you been convicted of a misdemeanor other than minor traffic offenses within the last three (3) years? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, please explain. _____							
Are you under 18 years old? <input type="checkbox"/> No <input type="checkbox"/> Yes							

Education and Training							
Did you graduate from high school or receive a GED certificate? <input type="checkbox"/> No <input type="checkbox"/> Yes Name/Location of H.S. _____							
Name of college, university or vocational school	Major	Dates Attended		Full Years Completed	Degrees Conferred		Credit Hours
		From	To		Title	Date	
Indicate any other trades, skills or licenses you possess related to the position for which you are applying. Include licensing state and expiration date. _____ _____ _____							

Applicant Signature	
<ul style="list-style-type: none"><li>I authorize Key Pen Parks, at the time of my application for employment or during the course of employment, to verify information (including criminal history) contained in this application as it relates to the position for which I am being considered, or in which I may be employed. I authorize all previous employers to furnish information concerning my past employment. I hereby acknowledge that the above information is being disclosed at my request and that I will make no claim whatsoever against Key Pen Parks, the agency being contacted, its agents, or employees arising out of disclosure of such information.</li><li>I certify my statements in this application are true, complete and correct to the best of my knowledge and belief. I understand any falsification or omission of information may bar me from consideration for employment. I understand all statements made on this application may be verified.</li></ul>	
_____ Signature of Applicant	_____ Date

## Employment History

Start with present or last job and work back. Be sure to include the experience which you feel qualifies you for this position. Include military service, volunteer service or other unpaid experience. Failure to complete this section may affect your being considered for an interview or employment. **RESUMES ARE NOT ACCEPTED IN LIEU OF COMPLETING THE APPLICATION.**

Employed by (agency or firm):		Your Job Title:
City & State		Your Duties:
Employed From (Mo. / Yr.)	To (Mo. / Yr.)	
Supervisor's Name	Phone No. (     )     -	
Supervisor's Title		
Starting Salary \$	Final \$	
Number of Hours Worked Per Week		
Number of Employees Supervised		
Reason for Leaving		
May We Contact This Employer <input type="checkbox"/> No <input type="checkbox"/> Yes		
Employed by (agency or firm):		Your Job Title:
City & State		Your Duties:
Employed From (Mo. / Yr.)	To (Mo. / Yr.)	
Supervisor's Name	Phone No. (     )     -	
Supervisor's Title		
Starting Salary \$	Final \$	
Number of Hours Worked Per Week		
Number of Employees Supervised		
Reason for Leaving		
May We Contact This Employer <input type="checkbox"/> No <input type="checkbox"/> Yes		
Employed by (agency or firm):		Your Job Title:
City & State		Your Duties:
Employed From (Mo. / Yr.)	To (Mo. / Yr.)	
Supervisor's Name	Phone No. (     )     -	
Supervisor's Title		
Starting Salary \$	Final \$	
Number of Hours Worked Per Week		
Number of Employees Supervised		
Reason for Leaving		
May We Contact This Employer <input type="checkbox"/> No <input type="checkbox"/> Yes		
Employed by (agency or firm):		Your Job Title:
City & State		Your Duties:
Employed From (Mo. / Yr.)	To (Mo. / Yr.)	
Supervisor's Name	Phone No. (     )     -	
Supervisor's Title		
Starting Salary \$	Final \$	
Number of Hours Worked Per Week		
Number of Employees Supervised		
Reason for Leaving		
May We Contact This Employer <input type="checkbox"/> No <input type="checkbox"/> Yes		

# Key Pen Parks

P.O. Box 70 • Lakebay, WA 98349  
253-884-9240 • answers@keypenparks.com

## ***Waiver and Release of Driving Record***

*To be submitted with application*

I, the undersigned applicant for employment with Key Pen Parks, hereby authorize the release of both my individual and my employee driving record, as defined by RCW 46.52.120 and 46.52.130 by the Department of Licensing, to Key Pen Parks. I have been informed that portions of this record are my confidential property and may not be obtained without my express consent and request. If I am hired by Key Pen Parks, this release shall continue to be valid throughout the tenure of my employment with Key Pen Parks.

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

## ***Reference Check Permission/ Authorization to Release Employment Records***

*To be submitted with application*

I, the undersigned applicant for employment with Key Pen Parks, in the consideration of the review of my employment application, do hereby give permission for an authorized representative of Key Pen Parks to inquire of former employers and other individuals about my ability to perform all aspects of the position for which I am being considered. Those individuals who supply references may respond freely to all questions concerning my job-related knowledge, skills, abilities, education and experience, and any other matters, which may be relevant to my performance in the position, I am seeking. I further release and authorize any prior employer of mine to release to Key Pen Parks, any and all records of my prior employment retained by my former employers.

I understand and agree to waive any claim or cause of action to use of any and all information gained through these inquiries or release of prior employment records and promise to defend and hold harmless Key Pen Parks, its officers and employees from any claim or loss arising from such release.

SIGNATURE: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

AFFIRMATIVE ACTION INFORMATION

Position Applied \_\_\_\_\_

Key Pen Parks provides equal opportunity in all terms, conditions and privileges of employment for all qualified job applicants and employees without regard to race, color, national origin, sex, age, marital status, veteran status, sexual orientation or the presence of disability. Providing this information is voluntary and will be kept in a confidential file separate from the application form.

Sex: Male [ ] Female [ ]

Age: Below 18 [ ] Above 18 but below 40 [ ] Above 40 [ ]

Ethnic Category: Caucasian [ ]
African American [ ]
Hispanic [ ]
Native American [ ]
Asian [ ]
Pacific Islander [ ]
Other [ ] Specify \_\_\_\_\_

FITNESS FOR DUTY

Can you perform the essential functions of the job, with or without reasonable accommodation? Yes [ ] No [ ]
Will you need reasonable accommodation to perform the essential functions of the job? Yes [ ] No [ ]. If yes, please describe the necessary accommodation (s) \_\_\_\_\_

RECRUITMENT INFORMATION

How did you hear about the position for which you are applying?

Web site [ ]
Friend or relative [ ]
District Job Bulletin [ ]
District Employee [ ]
Newspaper Ad [ ] Name of newspaper \_\_\_\_\_
Other [ ] Please specify \_\_\_\_\_