



1215 W. Holly Street Bellingham, WA 98225  
P 360.933.4807 F 360.933.4254

**APPLICATION FOR EMPLOYMENT**

**\*If dispatched from a Union, you only need to fill up to STOP sign, and sign last page\***

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

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

RESIDENTIAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

NUMBER: (\_\_\_\_) \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

**POSITION YOU ARE APPLYING FOR:** (Specify years of experience in this work)

LABORER \_\_\_\_\_ CONCRETE \_\_\_\_\_ OPERATOR \_\_\_\_\_ OFFICE \_\_\_\_\_

OTHER \_\_\_\_\_

Can you perform the essential functions, with or without reasonable accommodation, of the position for which you are applying? YES ( ) NO ( )

If no, please explain. (If you have any question as to what functions are applicable to the position for which you are applying, please review the job posting or ask for a copy of the posting before you answer this question.)

**TYPE OF EMPLOYMENT DESIRED:**

FULL-TIME ( ) PART-TIME ( ) TEMPORARY ( )

When would you be available to begin work? \_\_\_\_\_

1. Are you legally eligible to be employed in the United States? YES ( ) NO ( )  
*(Proof of identity and eligibility will be required upon employment)*
2. Are you over the age of 18 years? YES ( ) NO ( )  
*(If no you may be required to provide authorization to work.)*
3. JANSEN INC. is a drug and/alcohol free work place. Are you willing to take a Drug Test? YES ( ) NO ( )
4. Do you have a valid drivers license? State/Number \_\_\_\_\_ Exp. \_\_\_\_\_
5. Have you served in the U.S. Military? YES ( ) NO ( )  
Branch: \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_  
Did your military experience/training provide you with any skill(s) you could put to use in this job? If so, please list: \_\_\_\_\_
6. Have you ever worked for JANSEN INC. before? YES ( ) NO ( )  
If yes, when? \_\_\_\_\_ what Job Title? \_\_\_\_\_

7. Do you have any relatives employed by JANSEN INC.? YES ( ) NO ( )  
 If yes, please list name(s) and relationship(s):

\_\_\_\_\_

8. Where did you learn about applying for work with JANSEN INC.? \_\_\_\_\_



**EDUCATION:**

	School Name & Location	Course of Study	No. of Yrs. Completed	Diploma or Degree
High School				
College				
Vocational or Trade School				
Graduate School				

9. Have you completed any special courses, seminars and/or training directly related to the position for which you are applying? YES ( ) NO ( ) If yes, please describe:

\_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYMENT HISTORY:**

Beginning with your present or last employer, provide the following information about your employment record for the past ten (10) years. If additional space is needed, continue with the same format on a separate sheet of paper. Explain any gaps in employment in the "Applicants Notes on Employment" section that follows.

<p><b>Dates of Employment:</b> _____ thru _____</p> <p><b>Company Name:</b> _____</p> <p><b>Address:</b> _____ <b>City/State/Zip:</b> _____</p> <p><b>Direct Supervisor's Name &amp; Title:</b> _____</p> <p><b>Phone Number:</b> _____</p> <p><b>Description of Duties:</b> _____</p> <p>_____</p> <p>_____</p> <p><b>Reason for Leaving:</b> _____</p>
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**Dates of Employment:** \_\_\_\_\_ thru \_\_\_\_\_  
**Company Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_  
**Direct Supervisor's Name & Title:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving:** \_\_\_\_\_

**Dates of Employment:** \_\_\_\_\_ thru \_\_\_\_\_  
**Company Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_  
**Direct Supervisor's Name & Title:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving:** \_\_\_\_\_

**Dates of Employment:** \_\_\_\_\_ thru \_\_\_\_\_  
**Company Name:** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City/State/Zip:** \_\_\_\_\_  
**Direct Supervisor's Name & Title:** \_\_\_\_\_  
**Phone Number:** \_\_\_\_\_  
**Description of Duties:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
**Reason for Leaving:** \_\_\_\_\_

**Applicants Notes on Employment:** \_\_\_\_\_  
\_\_\_\_\_

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**REFERENCES:**

Please list 3 professional references including current and/or prior supervisors.

Name	Company/Relationship	Years Known	Contact Information

We are an equal opportunity employer and all qualified applicants will receive consideration for employment without regard to race, color, religion, sex, national origin, disability status, protected veteran status, or any other characteristic protected by the law.

**IMPORTANT, PLEASE READ AND SIGN**

I hereby authorize JANSEN INC. to contact any company or individual it deems appropriate to investigate my employment history, character, and qualifications. I understand that failure to reveal any prior employer or giving false or misleading information by me on any part of this Application for Employment can result in disqualification for employment consideration or, if hired, may be grounds for termination from the company or its' subsidiaries. I understand that if I am hired, my employment is for no definite time and may be terminated at any time without prior notice.

**Applicant Name** \_\_\_\_\_

**Applicant Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_