

# TACOMA ART MUSEUM EMPLOYMENT APPLICATION

(PLEASE PRINT ALL INFORMATION EXCEPT SIGNATURE)

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

THIS EMPLOYMENT APPLICATION IS NOT AN EMPLOYMENT CONTRACT but merely is intended to evaluate suitability for employment. It is the Company's policy to provide equal employment to all qualified persons without discrimination on the basis of sex, race, color, religion, age, marital status, national origin, citizenship, sexual orientation, disability, veteran status, or any other status protected under state and federal law. Please let us know if you need any special accommodation[s] to participate in the application process.

## PERSONAL INFORMATION

First	Middle	Last	Social Security #		
Home Phone			Cell Phone		
Email Address					
Please list your current address and two other most recent addresses below:					
Current:	Street	City	State	Zip	Since (Mo/Yr)
	Street	City	State	Zip	Since (Mo/Yr)
	Street	City	State	Zip	Since (Mo/Yr)
Name of Emergency Contact				Emergency Contact Phone	
Are you legally entitled to work in the U.S.?				<input type="checkbox"/> YES	<input type="checkbox"/> NO

## EMPLOYMENT INFORMATION

Position Applied For:	Date You Can Start Work:	Desired Salary: \$
Do you prefer <input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time	Can you work <input type="checkbox"/> Weekends <input type="checkbox"/> Evenings	
<b>Please answer all of the following questions. When necessary, note question number and use an extra piece of paper to provide explanations:</b>		
1) Are you at least 18 years of age? <input type="checkbox"/> YES <input type="checkbox"/> NO		
2) Will you work overtime when necessary? <input type="checkbox"/> YES <input type="checkbox"/> NO		
3) Have you received a job description, or are you aware of the essential functions of the job you are applying for? <input type="checkbox"/> YES <input type="checkbox"/> NO		
4) Do you understand the job requirements? <input type="checkbox"/> YES <input type="checkbox"/> NO (If no, please explain)		
5) Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input type="checkbox"/> YES <input type="checkbox"/> NO		
6) Are you currently bound by a non-competition, non-solicitation, confidentiality or trade secret agreement? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain)		
7) Have you ever been discharged or asked to resign from a job? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain)		
8) Have you ever been warned, disciplined, or discharged for sexual harassment, fighting, assault, or related offenses? <input type="checkbox"/> YES <input type="checkbox"/> NO (If yes, please explain)		

### EMPLOYMENT HISTORY

MAY WE CONTACT YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Please list your last three employers beginning with the most recent below:				
Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To		Supervisor	
Duties:		Reason For Leaving:		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To		Supervisor	
Duties:		Reason For Leaving:		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To		Supervisor	
Duties:		Reason For Leaving:		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To		Supervisor	
Duties:		Reason For Leaving:		
Next Most Recent Employer	City	State	Zip Code	Phone
Position Held	Dates From/To		Supervisor	
Duties:		Reason For Leaving:		

### VETERAN INFORMATION

Branch of Service:	Date of Entry:	Date of Discharge:
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### PERSONAL REFERENCES

**List names & telephone numbers of three references who are not related to you, e.g., co-workers, business associates, former supervisors. One reference must be a former supervisor.**

May we contact your references? <input type="checkbox"/> YES <input type="checkbox"/> NO
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Name: _____ Phone: _____
Address: _____ Email: _____
Occupation: _____
Relationship to you & How Long Known: _____

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relationship to you & How Long Known: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Occupation: \_\_\_\_\_

Relationship to you & How Long Known: \_\_\_\_\_

**APPLICANT'S CERTIFICATION AGREEMENT**

- 1) I authorize the Company to solicit information regarding my character, criminal background, driving abstract, general reputation, credit history, previous employment and similar background information, and to contact any and all references and previous employers I have given. I hereby release all parties and persons connected with any such request for information from claims, liabilities, and damages for any reason arising out of the furnishing of such information, including but not limited to defamation, invasion of privacy or similar causes of action. If employed by the Company, I release the Company from any liability for future references it may provide regarding my work history at the Company. If I am refused employment on the basis of a background report, I have a right, upon written request from me within a reasonable time, to a complete and accurate disclosure of the nature and scope of the investigations requested by the Company.
- 2) I agree, if I am offered and accept a position, to conform to all existing and future Company policies, rules and regulations and I understand that the Company reserves the right to change wages, hours and working conditions within the Company's sole discretion. ***I ALSO UNDERSTAND THAT, IF EMPLOYED, MY EMPLOYMENT WILL BE AT-WILL, MEANING THAT EITHER PARTY CAN END THE EMPLOYMENT RELATIONSHIP AT ANY TIME, FOR ANY OR NO REASON, WITH OR WITHOUT NOTICE.*** I also understand that no official of the Company other than the Executive Director of the Tacoma Art Museum has any authority to enter into an agreement for a specified period of time or make any agreement contrary to the foregoing.
- 3) I further understand that any employment offer is contingent upon my providing, within three (3) working days of employment, valid proof of identity and eligibility to work in order to comply with the Immigration Reform and Control Act of 1986.
- 4) If employed, I agree that if the Company advances any paid leave before it has been accrued, or advances or loans me any money during the course of my employment, the Company is authorized to deduct from my wages sufficient funds to repay such loans or advances.
- 5) I further certify that I am not engaged in any outside activity or business that could be considered in conflict with the interest of the Company or its customers. I will not become engaged in such activity or business during my employment if the Company employs me.

6) I certify that the facts and information set forth in this application are true and complete to the best of my knowledge. I understand that any falsification, misrepresentation or omission of facts on this application (or on any required documents) may result in denial of employment or immediate termination of employment, regardless of when or how discovered.

7) I have read and reviewed the information provided in this application and the above statements. By signing this application for employment I certify that I understand all parts of it and have answered all questions completely and fully.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name