



## Filling in the blanks

Please complete the form below. Do not complete any question until you have read all of the questions. You should use a blue or black ink pen. If words have to be written out, please print them. Do not leave any spaces blank, except as instructed. Check spelling carefully and print neatly so the material can be read. You have five minutes to complete all of the questions.

1. What is your name? \_\_\_\_\_
2. What is the occupation in which you are seeking employment?  
\_\_\_\_\_
3. Do you think this is the kind of work you will want to do the rest of your life?  Yes  No
4. Does job hunting make you nervous?  Yes  No
5. Do you generally take the time to write neatly?  Yes  No
6. Please list the occupations in which you are planning to seek employment in the order of highest interest. List years of experience you have next to your listed occupations.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. Do not complete any answers on this form except for number ten (10).
8. Are you looking forward to job hunting?  Yes  No
9. Have you ever job hunted before?  Yes  No
10. Did you read the instructions before you completed this form?  Yes  No

This exercise emphasizes the fact that it is hard to take time to read all directions if you feel you are under pressure. However, if you do not read the directions, you may do things that are unnecessary and time consuming. This can tell an employer that you will not take the time to do a job correctly. In this activity, question number seven instructed you to only answer question number 10.



# Applications

## Paper application checklist

Description	Completed
To fill the application out at the employer's work site, come prepared with a pen, employment dates, job titles, duties, names and locations of past employers, education history, accomplishments, list of software proficiency, skills and prior-employer contact information.	
Read the application before you begin to write.	
Follow instructions exactly as written. Check all appropriate boxes on the form.	
Make several copies of the blank application in case you need to reprint due to errors.	
Target your application to the job for which you are applying.	
First impressions are everything – keep your application neat. Nice handwriting (easy to read) – or typed; no smears, stains or ink smudges; odor free; no white-out or redactions.	
Use action words whenever possible for greater effect.	
List your most recent job first – then work backward for as much work history as requested on the application. Emphasize your knowledge, skills and abilities (accomplishments too, when possible).	
Never write “see résumé” to fill in details from your work history.	
Use spaces provided to write in answers. If you need to add additional information, use an asterisk (*) and write “see attached page for further information.” Include an additional typed page with any vital information that did not fit in the space provided by the employer. Use this option sparingly and only when it enhances your match to the open position.	
Make sure that all blanks on the application have been filled. If you can't fill in a question asked on the application, put N/A for not applicable. If the question is illegal (race, gender, religion, marital status, disability or other discriminatory information) or if you don't know the answer to a question, do not submit your form until you can resolve the issue.	
If you don't know what to put for desired wage, research wages in your area through the Employment Security Department website ( <a href="http://www.esd.wa.gov/employmentdata">www.esd.wa.gov/employmentdata</a> ); or use Salary.com website's Salary Wizard; or use the wage range listed on the job posting.	
If there is a large amount of space given to a particular question on the application, assume it is important to the employer. Use this space wisely to highlight how you are a match for the job.	
Attach résumé and/or cover letter, if required by the employer. Check the job listing or the application for this specific instruction.	
Check for spelling and grammar errors.	
Sign document if a signature line is provided on the form.	
Have someone else proof your work before submitting the document.	
Make yourself a copy of your paper application before you turn it in. You can review what you wrote before an interview or if the employer calls for clarifying information.	
Other:	



## APPLICATION FOR EMPLOYMENT

This generic application is provided by WorkSource Washington. This form complies with federal and state laws against discrimination; however, employers using this form should check local ordinances. WorkSource Washington and Washington State Employment Security are not responsible for the misuse of information provided on this form. Provide all information requested by printing in ink or typing. Use the 'TAB' key to move through the document.

### GENERAL INFORMATION

Name (Last)	(First)	(Middle Initial)	Home Telephone ( ) -
Address (Mailing Address)	(City)	(State)	(Zip)
E-Mail Address	Are you legally entitled to work in the U.S.? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Other Telephone ( ) -			

### POSITION

Position Or Type Of Employment Desired	Will Accept: <input type="checkbox"/> Part-Time <input type="checkbox"/> Full-Time <input type="checkbox"/> Temporary	Shift: <input type="checkbox"/> Day <input type="checkbox"/> Swing <input type="checkbox"/> Graveyard <input type="checkbox"/> Rotating
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		
Salary Desired	Date Available	

### EDUCATION AND TRAINING

High School Graduate Or General Education (GED) Test Passed?  Yes  No  
If no, list the highest grade completed

**College, Business School, Military (Most recent first)**

Name and Location	Dates Attended Month/Year	Credits Earned		Graduate	Degree & Year	Major or Subject
		Quarterly or Semester Hours	Other (Specify)			
	From To			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From To			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From To			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	From To			<input type="checkbox"/> Yes <input type="checkbox"/> No		

Occupational License, Certificate or Registration	Number	Where Issued	Expiration Date
Occupational License, Certificate or Registration	Number	Where Issued	Expiration Date
Occupational License, Certificate or Registration	Number	Where Issued	Expiration Date

Languages Read, Written or Spoken Fluently Other Than English

### VETERAN INFORMATION (Most recent)

Branch of Service	Date of Entry	Date of Discharge
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### SPECIAL SKILLS (List all pertinent skills and equipment that you can operate)

(Maximum 1000 characters)



EMS 10171 CC 7540-032 635  
ESD 1999 Rev. 12/30/03

**WORK EXPERIENCE (Most Recent First) (Include voluntary work and military experience)**

Employer	Telephone Number ( ) -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 1000 characters)		Hours Per Week
		Last Salary
		Supervisor
		Reason For Leaving
Employer	Telephone Number ( ) -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 1000 characters)		Hours Per Week
		Last Salary
		Supervisor
		Reason For Leaving
Employer	Telephone Number ( ) -	From (Month/Year)
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Employer	Telephone Number ( ) -	From (Month/Year)
Address		
Job Title	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 1000 characters)		Hours Per Week
		Last Salary
		Supervisor
		Reason For Leaving

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Interviewer's Comments:


WorkSource Washington and Washington State Employment Security are equal opportunity employers and providers of employment and training services. Auxiliary aids and services are available to persons with disabilities upon request.