

Application for Employment

An Equal Opportunity Employer

PLEASE RETURN TO:

Port of Benton

3250 Port of Benton Blvd, Richland, WA 99354

(509) 375-3060 fax: (509) 375-5287

email: info@portofbenton.com

In Compliance With Federal And State Equal Employment Opportunity Laws. All Qualified Applicants Including Disabled Veterans And Veterans Of The Vietnam Era Will Be Considered For All Positions Without Regard To Race, Color, Religion, Sex, National Origin, Age, Marital Status Or The Presence Of A Non-Job Related Medical Condition Or Handicap.

NAME (Last, First, Middle Initial):		Cell Phone:	
Address:		Emergency Contact Name:	
City / State/ Zip:		Emergency Contact Phone:	
Other Names By Which You Are Known By References Or Under Which School Or Employment Records Are Kept:		Email Address :	
EMPLOYMENT DESIRED			
Position Applying For:	Are You Applying For An Advertised Position?	Where Did You See Position Advertised?	
Referred By:	Date Available For Work:	Salary Expected:	
If Related To Anyone Now Employed By The Port, State Name And Relationship:	Are You Employed Now? Yes <input type="checkbox"/> No <input type="checkbox"/>	If So, May We Inquire Of Your Present Employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	
List Activities Or Prior Commitments That May Interfere With Attendance Requirements:			
List your last three employers and approximate dates of work.			
COMPANY NAME		JOB TITLE	
HIRE DATE		END DATE	
EDUCATION AND TRAINING			
Type Of School	Name & Location Of School (City & State)	Major Or Degree/ Certificate Received	Circle Last Year Completed or Write in fillable box
High School		Graduated? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> GED	9 10 11 12
College		Grade Point Average _____	1 2 3 4
Graduate School			1 2 3 4
Apprenticeship Trade Or Business School			1 2 3 4
Describe Any Other Relevant Training Or Experience You Wish Considered:			

PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THE APPLICATION.

APPLICANT AGREES TO THE FOLLOWING CONDITIONS OF EMPLOYMENT:

1. A background investigation and drug screen.
2. Meeting the age requirements of applicable laws and submitting proof of true age, if required.
3. If offered a position, applicant agrees that nothing prevents applicant from lawfully becoming employed in this country because of visa or immigration status.
4. If offered a position, applicant agrees they can provide proof of a legal right to work in the United States after hire.
5. Conforming to Port rules, regulations and instructions.

I certify that all statements in this application are true and correct and if any information submitted is false, it may be cause for dismissal. I understand that the Port may request an investigative report to be prepared regarding all information contained in this application. I authorize such investigations and inquiries of my personal, employment, financial or medical history and other related matters as may be necessary in arriving at an employment decision. I hereby release employers, schools or persons from all liability in responding to inquiries in connection with my application. I understand that this is an application for employment and that no employment contract is being offered.

Applicant's Signature _____ Date _____