



4414 S. 144th St.
 Tukwila, WA 98168
www.tukwilapool.org
 206-267-2350

Employment Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: _____ Email: _____

Position Applied for: _____

Are you a citizen of the United States? YES NO If no, are you authorized to work in the U.S.? YES NO

Have you ever been employed with the TPMPD? YES NO If yes, what position? _____

Education

High School: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Diploma: _____

College: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Other: _____ Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Trainings/Certifications

Training/Certification Type	Expiration

If you are not currently certified as a Lifeguard, are you applying for the Lifeguard Trainee Program?
 YES NO

If you checked "YES" and you are offered employment with the Tukwila Pool, do you agree to accept the position and continue working for the Tukwila Pool for a minimum of 3 months?
 YES NO

Previous Employment

Company: _____ Phone: _____

City/State: _____ Supervisor: _____

Job Title: _____ Starting Wage:\$ _____ Ending Wage:\$ _____

Responsibilities: _____

From: _____ To: _____ How much of that time were you actively employed in the position: Years: _____ Months: _____

Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____

City/State: _____ Supervisor: _____

Job Title: _____ Starting Wage:\$ _____ Ending Wage:\$ _____

Responsibilities: _____

From: _____ To: _____ How much of that time were you actively employed in the position: Years: _____ Months: _____

Reason for Leaving: _____

May we contact your previous supervisor for a reference? YES NO

Personal References - please provide two references who are not related to you

Name: _____ Phone: _____

Relation: _____ Email: _____

Name: _____ Phone: _____

Relation: _____ Email: _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Signature: _____ Date: _____



CRIMINAL HISTORY DISCLOSURE FORM

Washington law (RCW 35.61.130) and the Tukwila Pool Metropolitan Park District (TPMPD) require all applicants applying for employment with the TPMPD submit to a criminal background check through the Washington State Patrol and the Department of Justice (FBI).

“Convictions” include judge or jury verdicts, guilty pleas, “Alford” pleas, pleas of “nolo contendere,” convictions arising from military service, or criminal offenses resulting in deferred or suspended sentences. Convictions includes felonies and misdemeanors.

The information collected by this form will be maintained in accordance with state law.

- 1. Have you ever been convicted of a crime? *(please note that answering “Yes” will not automatically disqualify you for employment)*

ANSWER: YES____ NO____

If YES, explain below. For each conviction, identify your name at the time of the conviction (if different from today), the underlying crime, the date of conviction, the sentence, and the jurisdiction (county/state or city/state) where the conviction was entered.

- 2. Have you ever had findings made against you in any judicial or administrative adjudicative proceeding that resulted in a finding of, or upholds an agency finding of, domestic violence, abuse, sexual abuse, neglect, abandonment, violation of a professional licensing standard regarding a child or vulnerable adult, or exploitation or financial exploitation of a child or vulnerable adult?

ANSWER: YES____ NO____

If YES, explain below for each such finding.



CRIMINAL HISTORY DISCLOSURE FORM (Page 2)

By signing below, I certify, under penalty of perjury under the laws of the State of Washington, that the information provided on this form is true, correct, and complete. I understand that if I am hired, I can be discharged for any misrepresentations or omissions in this form. I further understand that if I am hired, the TPMPD will do a criminal background check through the Washington State Patrol criminal identification system and through the Federal Bureau of Investigation, including a fingerprint check, and that my employment with the TPMPD is contingent upon successful passage of this background check.

*Pursuant to Washington law, RCW 43.43.834, each applicant must be notified that a criminal background check will be conducted. Once an inquiry is made, an employer **must** notify an applicant of the Washington State Patrol's response within ten (10) days after the response is received. The employer **must** provide a copy of the response to the applicant and shall notify the applicant of such availability. The employer is responsible for any fees charged by Washington State Patrol for a criminal background check. Records provided by the Washington State Patrol and Department of Justice (FBI) shall **only** be used by an employer for initial employment decisions and shall be kept confidential.*

Applicant Name (Print) _____

Alias/Maiden Names _____

Date of Birth _____

Applicant Signature _____

Date Signed _____

Signed in _____, Washington