

First

905 80th St SW Everett, WA 98203

(425) 483-9090 Phone (425) 486-5656 Fax www.formostfuji.com

APPLICATION FOR EMPLOYMENT

Instructions: This application must be filled out completely and signed to be considered. You are encouraged to attach a resume and cover letter. Only applicants selected for interviews will be contacted; this application will remain in active status for 180 days.

Middle

Position you are applying for:

How did you learn about this position?

PLEASE PRINT

Street Address

City, State, Zip

Last

Home phone		Cell phone	Email
()		()	
natio marit	nal origin, citizenship status, physical tal status, status with regard to publi	or mental disability, race, religion, creed, gender, so c assistance, status as a disabled veteran and/or	yment opportunity to all persons regardless of age, color, ex, sexual orientation, gender identity and/or expression, veteran of the Vietnam Era or any other characteristic modations for otherwise qualified disabled individuals.
List addition	onal skills/abilities applicable to th	e position to which you are applying:	

Employment Record List present or most recent experience first. Statements such as "see resume" do not substitute for completing any portion of the application. Attach additional sheets as necessary.

Title		Duties
Company Name		
Street Address		
City	State Zip	
Supervisor's Name	Supervisor's Telephone	
Dates of Employment (Mo/Yr—Mo/Yr)		Reason for leaving
Title		Duties
Company Name		
Street Address		
City	State Zip	
Supervisor's Name	Supervisor's Telephone ()	
Dates of Employment (Mo/Yr—Mo/Yr)		Reason for leaving
		D #
Title		Duties
Company Name		Duties
		Duties
Company Name Street Address City	State Zip	Duties
Company Name Street Address City Supervisor's Name	State Zip Supervisor's Telephone ()	
Company Name Street Address City	·	Reason for leaving
Company Name Street Address City Supervisor's Name	·	
Company Name Street Address City Supervisor's Name Dates of Employment (Mo/Yr—Mo/Yr)	·	Reason for leaving
Company Name Street Address City Supervisor's Name Dates of Employment (Mo/Yr—Mo/Yr) Title	Supervisor's Telephone ()	Reason for leaving
Company Name Street Address City Supervisor's Name Dates of Employment (Mo/Yr—Mo/Yr) Title Company Name Street Address City	Supervisor's Telephone () State Zip	Reason for leaving
Company Name Street Address City Supervisor's Name Dates of Employment (Mo/Yr—Mo/Yr) Title Company Name Street Address City Supervisor's Name	Supervisor's Telephone ()	Reason for leaving Duties
Company Name Street Address City Supervisor's Name Dates of Employment (Mo/Yr—Mo/Yr) Title Company Name Street Address City	Supervisor's Telephone () State Zip	Reason for leaving

-								
Profess	ional References							
Name			Address			Teleph	none Number	Official Position
Name			Address			Teleph	none Number	Official Position
Name			Address			Teleph	none Number)	Official Position
			L			1 \	/	
License	es and Certificates	List any p	rofessional licenses, permits, and	certificate	s, including First A	id and C	PR)	
License		<u> </u>	Туре		State	Effecti	ve Date	Expiration Date
License			Туре		State	Effecti	ve Date	Expiration Date
License			Туре		State	Effecti	ve Date	Expiration Date
Educati	on							
Have you gra	aduated from high school or red	eived a GE	D certificate? ☐ Yes ☐ No					
				_				
Name of Hig	n School				City, State, Zip			
Type of School	Name of School		Street Address City, State, Zip		Degree or Diploma (Y/N)		Major A	Area(s) of Study
Community								
College I Technical								
College								
College or								
University (undergrad								
-uate)								

	Office Equ	ipment / Com	puter Skills / Mecl	nanical
Computer Operating Systems	Typing / Word Processing	Comp	uter Software	Other Equipment
☐ Windows ☐ Windows XP ☐ Macintosh ☐ Other (list)	Keyboard speed:	☐ Word ☐ Excel ☐ Outlook ☐ PowerPoint	☐ AutoCAD ☐ RS Logix ☐ SolidWorks ☐ Other (list)	☐ Other (list) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Other Information *	** All external hiring is conting	ent upon the success	ful completion of a pre-em	ployment criminal background check.
May we contact your curre	ent employer?	Yes 🗌 No	reasonable accomm	orm the essential functions of the job, with or without hodation?
• •	ation and Agreemen	it		
Please read carefully I hereby certify that the information provided in this application and in any accompanying materials is true and complete, and that there is no misrepresentation or falsification in any of the statements or answers to questions. I agree that if investigation discloses any misrepresentation or falsification, such disclosure will				nt my employment and compensation may be terminated at ith or without cause, at the option of the company or myself.
investigation discloses any misr	epresentation or falsification, such	l agree that if n disclosure will	and understand that no rep	resentative of the company, other than the President, has agreement contrary to the foregoing.
investigation discloses any misr constitute grounds for rejection employment. I hereby consent to and authorize relevant information concerning	representation or falsification, such of application or immediate dismiss ze any of my former employers to my previous employment record.	l agree that if n disclosure will ssal from furnish any and all In addition, I	and understand that no repauthority to enter into any all understand all company pompany must be paid on deduct from my final paych	agreement contrary to the foregoing. broperty must be returned and any indebtedness to the por before my last day of work. I authorize the company to seck an amount necessary to satisfy any unpaid obligation.
investigation discloses any misr constitute grounds for rejection employment. I hereby consent to and authorize relevant information concerning consent to and authorize the ed	representation or falsification, such of application or immediate dismis ze any of my former employers to	l agree that if n disclosure will ssal from furnish any and all In addition, I	and understand that no repauthority to enter into any a lunderstand all company pompany must be paid on deduct from my final paych lunderstand that my emplo	agreement contrary to the foregoing. broperty must be returned and any indebtedness to the portion before my last day of work. I authorize the company to
investigation discloses any misr constitute grounds for rejection employment. I hereby consent to and authoriz relevant information concerning consent to and authorize the ed all relevant information concern I release all parties concerned was a concer	representation or falsification, such of application or immediate dismiss are any of my former employers to my previous employment record. Incational institutions that I attended.	l agree that if n disclosure will ssal from furnish any and all In addition, I ed to furnish any and	and understand that no repauthority to enter into any all understand all company pompany must be paid on deduct from my final paych. I understand that my employeligibility and identity and I	agreement contrary to the foregoing. broperty must be returned and any indebtedness to the por before my last day of work. I authorize the company to seck an amount necessary to satisfy any unpaid obligation. by ment is contingent upon providing proof of employment
investigation discloses any misr constitute grounds for rejection employment. I hereby consent to and authoriz relevant information concerning consent to and authorize the ed all relevant information concern I release all parties concerned valiability, and damages for whate	representation or falsification, such of application or immediate dismiss are any of my former employers to my previous employment record. Incational institutions that I attended ing my educational background.	l agree that if n disclosure will sal from furnish any and all ln addition, I ed to furnish any and om all claims, g this information.	and understand that no repauthority to enter into any all understand all company pompany must be paid on deduct from my final paych. I understand that my employeligibility and identity and I	agreement contrary to the foregoing. broperty must be returned and any indebtedness to the por before my last day of work. I authorize the company to seck an amount necessary to satisfy any unpaid obligation. byment is contingent upon providing proof of employment will present the necessary documents when asked.