



## APPLICATION FOR EMPLOYMENT

Complete the entire application or it may be deemed incomplete and may not be considered.

| POSITION                                                                                                                                                                                                                                                               |    |                                                                                                                                                |                   |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----|------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|
| Job Title                                                                                                                                                                                                                                                              |    | Application Date                                                                                                                               |                   |
| Availability: <input type="checkbox"/> Full Time <input type="checkbox"/> Part Time <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer                                                      |    |                                                                                                                                                |                   |
| PERSONAL INFORMATION                                                                                                                                                                                                                                                   |    |                                                                                                                                                |                   |
| Name (Last, First, MI)                                                                                                                                                                                                                                                 |    | Other Names Used                                                                                                                               |                   |
| Mailing Address                                                                                                                                                                                                                                                        |    | City, ST, Zip                                                                                                                                  |                   |
| Email                                                                                                                                                                                                                                                                  |    | Phone Number                                                                                                                                   |                   |
| Are you 18 years of age or older?<br>Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                          |    | Are you authorized to work in the U.S.?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                            |                   |
| Are you a military veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Have you included a DD214? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                            |    | Have you worked for TBCC before? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>Job Title/Year?                                   |                   |
| Are you bi-lingual? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, what languages?                                                                                                                                                                |    | Valid driver's license, if required for the position?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A |                   |
| How did you learn about this position?                                                                                                                                                                                                                                 |    |                                                                                                                                                |                   |
| EDUCATION                                                                                                                                                                                                                                                              |    |                                                                                                                                                |                   |
| High School Diploma/GED <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                       |    |                                                                                                                                                |                   |
| College/University                                                                                                                                                                                                                                                     | ST | Major / Minor                                                                                                                                  | Degree/Cert. Type |
|                                                                                                                                                                                                                                                                        |    |                                                                                                                                                |                   |
|                                                                                                                                                                                                                                                                        |    |                                                                                                                                                |                   |
| EMPLOYMENT HISTORY                                                                                                                                                                                                                                                     |    |                                                                                                                                                |                   |
| List your current or most recent job position for up to 10 years of employment. Provide a summary your job duties and how they qualify you for the position you are applying for. Resumes do not replace the application. Incomplete applications may be disqualified. |    |                                                                                                                                                |                   |
| Last or Present Employer                                                                                                                                                                                                                                               |    | Date Started                                                                                                                                   | Date Ended        |
| Job Title                                                                                                                                                                                                                                                              |    | Phone                                                                                                                                          |                   |
| Supervisor                                                                                                                                                                                                                                                             |    | May we contact this employer?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later                       |                   |
| Job Duties                                                                                                                                                                                                                                                             |    |                                                                                                                                                |                   |

Reason for Leaving

|                    |                                                                                                                          |            |
|--------------------|--------------------------------------------------------------------------------------------------------------------------|------------|
| Employer           | Date Started                                                                                                             | Date Ended |
| Job Title          | Phone                                                                                                                    |            |
| Supervisor         | May we contact this employer?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |            |
| Job Duties         |                                                                                                                          |            |
| Reason for Leaving |                                                                                                                          |            |

|                    |                                                                                                                          |            |
|--------------------|--------------------------------------------------------------------------------------------------------------------------|------------|
| Employer           | Date Started                                                                                                             | Date Ended |
| Job Title          | Phone                                                                                                                    |            |
| Supervisor         | May we contact this employer?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |            |
| Job Duties         |                                                                                                                          |            |
| Reason for Leaving |                                                                                                                          |            |

|                                                                |                                                                                                                          |            |
|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------|------------|
| Employer                                                       | Date Started                                                                                                             | Date Ended |
| Job Title                                                      | Phone                                                                                                                    |            |
| Supervisor                                                     | May we contact this employer?<br><input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Later |            |
| Job Duties                                                     |                                                                                                                          |            |
| Reason for Leaving                                             |                                                                                                                          |            |
| <b>OTHER RELEVANT EXPERIENCE, SPECIAL TRAINING, AND SKILLS</b> |                                                                                                                          |            |

*Please summarize any relevant vocational experience, training, licenses, certifications, special skills, or background related to the position, including staff training, military service, volunteer work, teaching, or teaching assistant roles.*

### THREE PROFESSIONAL REFERENCES (REQUIRED)

|      |                       |       |
|------|-----------------------|-------|
| Name | Position/Company Name | Email |
| Name | Position/Company Name | Email |
| Name | Position/Company Name | Email |

### Employment Disclosure and Notices

**Notice of Non-Discrimination:** Tillamook Bay Community College does not discriminate on the basis of race, color, national origin, disability, sex, age, religion, height/weight ratio, marital status, gender, gender identity, sexual orientation, organizational affiliation, political affiliation or protected veterans with regard to employment, admissions, access to education programs or activities as set forth in compliance with federal and state statutes and regulations.

**At Will Employment:** Tillamook Bay Community College reserves the right to employ at will. Employment can be terminated, with or without cause, and with or without notice, at any time, at the option of the College or at the option of the employee.

**E-Verify:** Tillamook Bay Community College participates in the E-Verify program. We provide the federal government with Form I-9 information to confirm that individuals hired are authorized to work in the United States.

**Incomplete Application:** Your application may be considered incomplete if you do not answer all of the questions, submit any required supplemental documentation, and sign your application.

**Employment Certification:** As an applicant for a position with Tillamook Bay Community College, I certify that the responses given herein are true and complete to the best of my knowledge. In the event of employment, I understand that false or misleading information given on my application may result in discharge. I also understand that if I become employed, I will be required to abide by all rules and regulations of the employer of this position. In addition, I understand that I must reapply to be considered for other openings.

I understand that as part of the pre-employment process that the employer has a need to ask for prior employer(s) about my performance and conduct on the job and may verify education and certification records as needed for this job opening. I also understand that my prior employer and schools have a legitimate interest in providing this information in response to this application. I understand that the employer and/or their representative intends to contact my prior employers and/or schools to obtain information regarding my work related performance and conduct. I authorize my prior employers and schools (and their agents) to provide this information and agree to hold them harmless and release them from any claims, including claims for defamation, for providing this information to the employer and/or their representative. I authorize investigation of all statements contained in this application for

employment and/or any attached resume and cover letter as may be necessary in arriving at an employment decision.

By signing below, I understand that I am agreeing to the Employment Disclosure and Notices section of this application and that my signature here indicates that I have read and understood the statements shown in this disclosure.

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**Applicant's Signature**

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**Date**

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**Printed Name**