

Qualitel Corporation 11831 Beverly Park Rd., Bldg. A Everett, WA 98204 **425-423-8388** • Fax 425-423-8398

EMPLOYMENT APPLICATION

Application Date:	Position/		
	Job Title		
When can you	Salary Desired - \$/HOU	J R :	
Start?	(THIS IS REQUIRED)	
Shift: 1st (6am-2:30 pm)	Full Time		
2 nd (2:45pm-01:15 am) Monday -Thursday		Part Time	
Have you ever applied for employment with this company before?			
☐ Yes ☐ No If yes, when?			
How did you hear about us?			

This company is an equal opportunity employer and will not discriminate in the hiring process on the basis of sex, religion, race, color, age, national origin, ancestry or handicap.

PERSONA	AL INFORMATION					
Last Name		Firs	t			Middle
Street Address				Home or Cell Phone Number		
City, State, Zip				E-mail Address		
Are you 18	years of age or older?	Yes No Are you	ı legally	eligible for	employment ir	the U.S? Yes No
School	Name/Location	Course / Study	# Yrs	. Did yo	ou Graduate?	Degree / Diploma/ Grade
High				Y	es No	
Trade				Y	es No	
College				Y	es No	
Other				Y	es No	
Other speci	ial training or skills (lang	uages, machine opera	tion, etc.			
EMPLOY	MENT HISTORY (li	ist below last three	employ	ers, starti	ing with last o	one)
Company Name				Employed (state Month and Year)		
				From	То	
City/State/Phone			Reason for Leaving			
State Job Title and Describe Your Work						

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	Company Name	Employed (state Mont From To	th and Year)	
Company Name Employed (state Month and Year)	City/State/Phone	Reason for Leaving		
Company Name Employed (state Month and Year)				
City/State/Phone Reason for Leaving State Job Title and Describe Your Work REFERENCES (PLEASE DO NOT LIST RELATIVES, PREFERABLY EMPLOYERS LISTED ABOVE) Name/Title/Relationship Company (optional) Phone # Years Know Please list any relatives and or friends currently working with us: I certify that all information given above is true and complete to the best of my knowledge. Yes I understand that information contained in my job application may be utilized for the purposes of obtaining and/or verifying information about me, including but not limited to; criminal background checks, motor vehicle reports, and accrediting institution records. I hereby authorize youlaited Corporation to conduct these inquiries, and authorize any entities receiving such inquiries to release the lawfully requested information. I authorize reference and background checks Yes	State Job Title and Describe Your Work			
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Signature Name (print)	I authorize reference and background checks			
	Signature	Name (print)		

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