

APPLICATION FOR EMPLOYMENT

**North Hood Canal
Chamber of
Commerce**

Date of Application

E-mail Address		Last Name		First Name		Middle Name	
Address (Street number and name)				City		County	
State		Zip Code	Phone Home or Cell				

Availability Do you now work for the Chamber? YES NO		Are you related by blood or marriage to any person now working for the Chamber ? If yes, give name, relationship to you and the agency where employed.				
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Send application and resume (if available) to: **North Hood Canal Chamber of Commerce**
 P.O. Box 774
 Quilcene, WA 98376
 Attn: Stacey Nimmo, VIC Administrator

If you are not available for work now, enter the earliest date you could begin work (mo/day/yr.) _____

Job Applied For

Job Title: _____ Job Location: _____

Referral Source

How did you hear of this job opening?: _____

Education

Circle highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 GED College 1 2 3 4 Graduate School 1 2 3 4

Special training programs, classes and seminars related to this position (list):

