

# APPLICATION FOR EMPLOYMENT

This generic application is provided by WorkSource Washington. This form complies with federal and state laws against discrimination; however, employers using this form should check local ordinances. WorkSource Washington and Washington State Employment Security are not responsible for the misuse of information provided on this form. Provide all information requested by printing in ink or typing. Use the 'TAB' key to move through the document.

## GENERAL INFORMATION

<b>Name (Last)</b> Weis	<b>(First)</b> Malachi	<b>(Middle Initial)</b> J	<b>Home Telephone</b> (509) 308 - 9407
<b>Address (Mailing Address)</b> E Solar PR NE, Benton City, WA 99320	<b>(City)</b> Benton City	<b>(State)</b> WA	<b>(Zip)</b> 99320
<b>E-Mail Address</b> malachijweis@gmail.com		Are you legally entitled to work in the U.S.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

## POSITION

<b>Position Or Type Of Employment Desired</b> Filmmaking	<b>Will Accept:</b> <input checked="" type="checkbox"/> Part-Time <input checked="" type="checkbox"/> Full-Time <input checked="" type="checkbox"/> Temporary	<b>Shift:</b> <input checked="" type="checkbox"/> Day <input type="checkbox"/> Swing <input type="checkbox"/> Graveyard <input type="checkbox"/> Rotating
Are you able to perform the essential functions of the job you are applying for, with or without reasonable accommodation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Salary Desired</b> Negotiable	<b>Date Available</b> 11-18-19	

## EDUCATION AND TRAINING

High School Graduate Or General Education (GED) Test Passed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
If no, list the highest grade completed						
<b>College, Business School, Military (Most recent first)</b>						
Name and Location	Dates Attended Month/Year	Credits Earned		Graduate	Degree & Year	Major or Subject
		Quarterly or Semester Hours	Other (Specify)			
Tri-Tech Skills Center Kennewick WA	From 9-19			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2021	DAFM and Video Game Design
	To 5-20					
	From			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To					
	From			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To					
	From			<input type="checkbox"/> Yes <input type="checkbox"/> No		
	To					
<b>Occupational License, Certificate or Registration</b>		<b>Number</b>	<b>Where Issued</b>		<b>Expiration Date</b>	
<b>Occupational License, Certificate or Registration</b>		<b>Number</b>	<b>Where Issued</b>		<b>Expiration Date</b>	
<b>Occupational License, Certificate or Registration</b>		<b>Number</b>	<b>Where Issued</b>		<b>Expiration Date</b>	
Languages Read, Written or Spoken Fluently Other Than English						

## VETERAN INFORMATION (Most recent)

<b>Branch of Service</b>	<b>Date of Entry</b>	<b>Date of Discharge</b>
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## SPECIAL SKILLS (List all pertinent skills and equipment that you can operate)

(Maximum 300 characters) Camera angles/usage, Adobe Creative Suite, Computer Operating Systems, 2D Unity, Various Animal Care, and Minor Python.
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**WORK EXPERIENCE** (Most Recent First) (Include voluntary work and military experience)

Employer	Christ The King Church	Telephone Number ( ) -	From (Month/Year)
Address			1111 Stevens Dr. Richland, WA 99354
Job Title	Balloon Animal Maker	Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters) Making Balloon animals or swords, getting customer orders, customer care.			9/21/19
			Hours Per Week
			19
			Last Salary
			0
			Supervisor
Reason For Leaving			Even was over.
			May We Contact This Employer? <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Employer		Telephone Number ( ) -	From (Month/Year)
Address			
Job Title		Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)			
			Hours Per Week
			Last Salary
			Supervisor
Reason For Leaving			
			May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Telephone Number ( ) -	From (Month/Year)
Address			
Job Title		Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)			
			Hours Per Week
			Last Salary
			Supervisor
Reason For Leaving			
			May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No
Employer		Telephone Number ( ) -	From (Month/Year)
Address			
Job Title		Number Employees Supervised	To (Month/Year)
Specific Duties (Maximum 350 characters)			
			Hours Per Week
			Last Salary
			Supervisor
Reason For Leaving			
			May We Contact This Employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

I certify the information contained in this application is true, correct, and complete. I understand that, if employed, false statements reported on this application may be considered sufficient cause for dismissal.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Interviewer's Comments:
