



SEA TECHNOLOGY CONSTRUCTION, INC.

309 SOUTH CLOVERDALE STREET, SUITE E-15
SEATTLE, WA 98108

APPLICATION FOR EMPLOYMENT FORM

PERSONAL INFORMATION

First Name: _____ **Middle I:** _____ **Last Name:** _____

Today's Date: _____ **Social Security Number:** _____

Current Address: _____ **City, State, Zip:** _____

Permanent Address: _____ **City, State, Zip:** _____

Phone #: () - _____ **Email:** _____

U.S. Citizen: Yes No Other: _____

Referred by: _____

How did you hear about this job opening? _____

EMPLOYMENT DESIRED

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including: race, color, age, sex, gender, sexuality, disability, prior criminal conviction, creed, religion, or national origin.

Position: _____ **Date you can start:** _____ **Desired Salary:** _____

Are you currently employed? No Yes If so, Where? (Optional): _____

Have you ever applied to this company before? Yes No

When: _____ Which Position? _____

EDUCATION

High School Completed? Yes No GED completed?

School: _____ City, State, Zip: _____

College / Higher Education

School: _____ City, State, Zip: _____

Years Completed: _____ Graduate Degree Earned: _____

School: _____ City, State, Zip: _____

Years Completed: _____ Graduate Degree Earned: _____

Trade, Business or Correspondence School

Do you speak any other language(s)? No

Language: _____ Proficiency: _____ Speak: Read/Write:

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CERTIFICATIONS AND/OR LICENSES

Organization: _____ **What:** _____ **Expiration:** _____

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EMPLOYMENT HISTORY

List last FOUR employers below, begin with most recent:

Organization Name:

Position:

Salary:

Began:

End:

Reason for leaving:

Organization Name:

Position:

Salary:

Began:

End:

Reason for leaving:

Organization Name:

Position:

Salary:

Began:

End:

Reason for leaving:

Organization Name:

Position:

Salary:

Began:

End:

Reason for leaving:

REFERENCES

Please list THREE individuals you have known for at least one year and are not your relation.

Name/Relationship:

Contact Information:

Name/Relationship:

Contact Information:

Name/Relationship:

Contact Information:

**PLEASE SUBMIT APPLICATION FORM AND RESUME TO CONTACT@STCC-US.COM OR FAX (206) 282-9158
FOR MORE INFORMATION, PLEASE EMAIL CONTACT@STCC-US.COM OR CALL (206) 282-9158**