



321 WEST STATE STREET  
 P.O. BOX 307  
 ABERDEEN, WA 98520-0078  
 PHONE (360) 532-5220  
 FAX (360) 532-5761

**Please answer all questions and type or print legibly.**

<b>Personal Information</b>	
Today's Date:	
Last Name:	First Name: <span style="float: right;">M.I.</span>
Are you eligible to work in the United States? Y ( ) N ( )	
Address:	City: <span style="margin-left: 50px;">State:</span> <span style="margin-left: 50px;">Zip Code:</span>
Home Phone:	Position desired:
Cell/Other:	Wage desired: <span style="margin-left: 100px;">Date available:</span>
Union: Y ( ) N ( ) Apprentice ( ) Journeyman ( )	Local:

<b>Education</b>			
School	Name	City, State	Diploma or Degree earned
High School:			
Trade School:			
College:			
Other training, special skills or experience related to the position you are applying for:			

<b>Work History</b>		
<b>Begin with current or most recent employer.</b>		
Employer #1	Start Date:	End Date:
City, State:	Supervisor's name:	
Job Title:		
Describe your duties:		
Reason for leaving:		



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### Work History, Continued

Employer #2	Start Date:	End Date:
City, State:	Supervisor's name:	
Job Title:		
Describe your duties:		
Reason for leaving:		

Employer #3	Start Date:	End Date:
City, State:	Supervisor's name:	
Job Title:		
Describe your duties:		
Reason for leaving:		

### References

Please provide three references who are non-relatives and have known you for at least one year.

Name	Phone	Relationship to you

Have you ever been employed by Rognlin's, Inc. before? Y ( ) N ( )

Please provide the names of any relatives employed by Rognlin's, Inc.: \_\_\_\_\_

How were you referred to us? \_\_\_\_\_

**I CERTIFY BY MY SIGNATURE BELOW THAT ALL INFORMATION PROVIDED IN THIS APPLICATION IS ACCURATE AND TRUE.**

Signature: \_\_\_\_\_

Printed name: \_\_\_\_\_