

\* = required field

Please print LEGIBLY, in INK, or type

FOR OFFICIAL USE ONLY  
(DO NOT write in this space)

REMINDER: This form MUST be completed by the applicant, not parents

\* Birth Date: (mm/dd/yy) \_\_\_\_\_

\* FIRST NAME: \_\_\_\_\_ M.I. \_\_\_\_\_ \* LAST NAME: \_\_\_\_\_

\* HOME ADDRESS: \_\_\_\_\_  
(Include House #, Street-Ave-Court-etc., plus NW, SW, as applicable)

P O BOX (if you have one): \_\_\_\_\_  
(You may miss a chance to interview for the job if your address is incomplete)

- \* COUNTY (check one)
- Adams  Lincoln
  - Asotin  Pend Oreille
  - Columbia  Spokane
  - Ferry  Stevens
  - Franklin  Walla Walla
  - Garfield  Whitman
  - Grant  Other (write in) \_\_\_\_\_

\* CITY: \_\_\_\_\_ \* STATE: \_\_\_\_\_ \* ZIP CODE: \_\_\_\_\_

Does your address change in the summer?  NO  YES

\* E-MAIL: \_\_\_\_\_

\* HOME PHONE: ( ) CELL / MESSAGE PHONE: ( )

Where did you learn about this opportunity?

- School  Ecology Website  Other: \_\_\_\_\_

\* HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY?  NO  YES

**WHERE do you want to work?** The Eastern Regional Office runs summer crews in the locations listed below. Please visit Ecology's website at <http://www.ecy.wa.gov/programs/swfa/eyc/regionalmap.html> for information about other crew locations in Washington State.

Please select ONLY ONE location: **\*SPECIFIC SESSION DATES AND LOCATIONS ARE SUBJECT TO CHANGE**

- |                                     |                                      |
|-------------------------------------|--------------------------------------|
| <input type="checkbox"/> Chewelah   | <input type="checkbox"/> Pasco       |
| <input type="checkbox"/> Clarkston  | <input type="checkbox"/> Pullman     |
| <input type="checkbox"/> Colville   | <input type="checkbox"/> Republic    |
| <input type="checkbox"/> Ephrata    | <input type="checkbox"/> Ritzville   |
| <input type="checkbox"/> Inchelium  | <input type="checkbox"/> Spokane     |
| <input type="checkbox"/> Moses Lake | <input type="checkbox"/> Walla Walla |
| <input type="checkbox"/> Othello    | <input type="checkbox"/> Wilbur      |

**Please select session:** If you are able to work both sessions you may mark both, but if chosen, it will ONLY be for one session. Otherwise, check which session you are available to work.

- 1<sup>st</sup> Session** (Mon, June 25 – Fri, July 20)  **2<sup>nd</sup> Session** (Mon, July 23 – Fri, Aug 17)

DO NOT DETACH

EQUAL OPPORTUNITY INFORMATION: In order to ensure equal employment opportunity, the Washington State Department of Ecology requests your voluntary cooperation by completing the following information. Your answers will be confidential.

NAME: \_\_\_\_\_ BIRTHDATE: \_\_\_\_\_  
(First) (M.I.) (Last) (month / day / year)

GENDER:  Male  Female

RACE / ETHNIC ORIGIN (circle all that apply)

DISABLED?  NO  YES

- A – Native American    M – Hispanic    C – Asian/Pacific Islander  
B – African American    W – Caucasian    Other \_\_\_\_\_

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**EMERGENCY CONTACT INFORMATION** (Parent or legal guardian – person with legal authority to authorize medical care)

\* FIRST NAME: \_\_\_\_\_ LAST NAME: \_\_\_\_\_ \* RELATIONSHIP: (check one)

\*  check here if home address is the same as applicant, if different FILL IN BELOW

- Parent  
 Legal Guardian  
 Other (explain) \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PO BOX: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

\* HOME PHONE: (    ) \_\_\_\_\_ CELL or WORK PHONE: (    ) \_\_\_\_\_

**EDUCATION INFORMATION**

\* SCHOOL NAME: \_\_\_\_\_ \* CURRENT GRADE LEVEL (year in school): \_\_\_\_\_

**EMPLOYMENT HISTORY** (List most recent employer first)\* Have you worked for the Ecology Youth Corps before?  NO  YES \* If yes, when? Summer of \_\_\_\_\_  
(You may work no more than TWO summers for EYC)Have you applied to work for us before?  NO  YESHave you interviewed with us before?  NO  YES

EMPLOYER #1 - NAME:	Start date:	End Date:
ADDRESS:	CITY:	STATE:
PHONE: (    )	HOURS PER WEEK:	Name of immediate supervisor:
Specific Duties:		

EMPLOYER #2 – NAME:	Start date:	End Date:
ADDRESS:	CITY:	STATE:
PHONE: (    )	HOURS PER WEEK:	Name of immediate supervisor:
Specific Duties:		

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**EXPERIENCE** (Answer each question, to the best of your ability)

\* Describe (with as much detail as possible) any skills or experience gained through volunteer work, community projects, or service organizations and include the dates and nature of the project or organization.

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\* Describe any special skills or capabilities you have that might relate to this EYC job. WHY SHOULD WE HIRE YOU?

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\* Describe your hobbies, interests, school activities, etc.

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\*  By checking this box, I certify that I filled out this application, and, to the best of my knowledge, the information provided is true and complete. I understand any false or misleading information may result in the rejection of my application or my termination if employed.

\*  Checking this box means I understand my application will NOT be accepted unless TWO teacher references are also submitted with this Part 1 application, NO exceptions.

\*  Checking this box means I understand my complete application (Part 1 AND 2) must be received **by the April 2, 2012 deadline**. I also understand faxes and late applications will NOT be accepted, **NO** exceptions.

\*

\_\_\_\_\_  
Signature of APPLICANT (in INK)

\_\_\_\_\_  
DATE

**WHERE TO MAIL your Part 1 Application AND Part 2 Teacher References:**

DEPARTMENT OF ECOLOGY – ERO  
ATTN: EYC SECRETARY  
N. 4601 MONROE  
SPOKANE, WA 99205-1295

**Questions?** For more information or to apply online, visit Ecology’s website at:  
<http://www.ecy.wa.gov/programs/swfa/eyc/ero.html>