



Carlyon Beach Homeowners' Association

First Name	Middle Initial	Last Name
Physical Address	City	State and Zip code
Email Address	Mobile Phone	Business Phone
Mailing Address if Different	City	State and Zip code

Internet Source – please specify
Job Announcement posted by a state or other agency bulletin board – please specify
Personal Referral – please specify
Professional Trade Journal – please specify
Walk-in
Other

Employment History

1	Employer	Title	
	Supervisor	Supervisor's Telephone	Responsibilities
	May we contact supervisor? Yes No	Dates of Employment (Mo/Yr - Mo/Yr)	Reason for leaving

2	Employer	Title	
	Supervisor	Supervisor's Telephone	Responsibilities
	May we contact supervisor? Yes No	Dates of Employment (Mo/Yr - Mo/Yr)	Reason for leaving

3	Employer	Title	
	Supervisor	Supervisor's Telephone	Responsibilities
	May we contact supervisor? Yes No	Dates of Employment (Mo/Yr - Mo/Yr)	Reason for leaving

4	Employer	Title	
	Supervisor	Supervisor's Telephone Responsibilities	Responsibilities
	May we contact supervisor? Yes No	Dates of Employment (Mo/Yr - Mo/Yr)	Reason for leaving

5	Employer	Title	
	Supervisor	Supervisor's Telephone Responsibilities	Responsibilities
	May we contact supervisor? Yes No	Dates of Employment (Mo/Yr - Mo/Yr)	Reason for leaving

Education

Have you graduated from high school or received a GED certificate? No Yes

If yes, when? _____

Name of Association or University	City, State	From: Mo/Yr	To: Mo/Yr	Degree or Diploma Earned	Major

Licenses and Certificates (List all of your professional licenses, permits, and certificates)

Type	License	State	Expiration Date:
Type	License	State	Expiration Date:
Type	License	State	Expiration Date:

Professional References

Name	Title/Business Name	Telephone Number	Email
Name	Title/Business Name	Telephone Number	Email
Name	Title/Business Name	Telephone Number	Email

Criminal Background

Have you ever been convicted of a criminal offense other than a minor traffic violation? No Yes

If yes, please list date, location, case number, convicting court, offense charged, offense convicted, and sentence (including any conditions of probation or parole and when those conditions were met or due to be met).

Applicant's Certification and Agreement

Please read carefully.

I hereby certify that the information provided in this application is true and complete, and that there are no willful misrepresentations in and no falsification of any of the statements and answers to questions. I am aware that should investigation disclose any misrepresentation or falsification, such disclosure will constitute grounds for rejection of application or immediate dismissal.

I hereby consent to and authorize any of my former employers to furnish any and all relevant information concerning my previous employment record. I hereby consent to and authorize any of my previous educational institutions to furnish any and all relevant information concerning my previous educational record. I release all parties connected with any request for information from all claims, liability, and damages for whatever reason arising out of furnishing this information. If employed, I release Carlyon Beach Homeowners' Association from any liability for future references it may provide regarding my work history at Carlyon Beach Homeowners' Association.

A photocopy of this release shall have the same effect as the original.

If I am employed I understand that I must provide proof of employment authorization and of identity and will provide the documents when asked.

I understand that should my position have unsupervised access to children under sixteen years of age or developmentally disabled persons, I will consent to a background investigation to check all information contained in or related to my application, including records of law enforcement agencies. If I am employed, I understand that employment will be on a conditional basis pending completion of the background check. I understand that should investigation disclose misrepresentation or omission; such disclosure will constitute grounds for rejection of application or immediate dismissal.

I understand that I am responsible to Carlyon Beach Homeowners' Association for the replacement value of any Association property that I retain beyond my exit date. I hereby authorize the Association to deduct from my final paycheck any monies that I owe the Association. If the balance of my final paycheck is not sufficient, I understand that the balance owed is a legal obligation. I agree that the Association has the right to collect the balance owed.

I have read and understand the information on this application.

Printed Name: _____ Date: _____

Signature: _____
(not required for electronic submissions)

Carlyon Beach Home Owners Association (CBHA) is an equal opportunity employer. We strive to create a working environment that includes and respects cultural, racial, ethnic, sexual orientations and gender identity diversity. Women, racial and ethnic minorities, persons with disabilities, persons over 40 years of age, disabled and Vietnam era veterans and people of all sexual orientations and gender identities are encouraged to apply. CBHA complies with the Americans with Disabilities Act. Applicants needing accommodation in the application process in an alternative format may contact the Association Office at (360) 866-0717. We strongly encourage applicants to apply without regard to race, color, religion, sex, sexual orientation, national origin, age, marital or veteran status, disability, or any other legal protected status. Carlyon Beach Home Owners Association is a drug-free workplace.