

Breastfeeding Peer Counselor Application

Return to: Pregnancy Aid – WIC 1819 100th Pl. SE, Ste. B Everett, WA 98208

Name			Date		
Address					
	T				
Phone number	Email address				
Languages (other than English)					
Previous employment (begin with most recent) Dates of employment Position held:					
Dates of employment					
From: To:					
Business Name:		Supervisor:			
Address:			Phone number:		
Reason for leaving:					
Dates of employment		Position held:	Position held:		
From: To:					
Business Name:		Supervisor:			
Address:			Phone number:		
Reason for leaving:					
Dates of employment		Position held:	Position held:		
From: To:					
Business Name:		Supervisor:			
Address:			Phone number:		
Reason for leaving:					

Have you ever been fired because of misconduct or violence?					
No					
Yes Please explain:					
Current or previous breastfeeding experience is a job requirement. Please tell us about your breastfeeding experience(s):					
Current or previous participation in WIC is a job requirement. Please tell us where you are/were on WIC					
Please list two references	Nama				
Name	Name				
Address	Address				
Daytime phone number Daytime phone number					
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Lunderstand that if Lassant employment, a criminal ha	karound chock will be procured	d and that my amployment may			
I understand that if I accept employment, a criminal background check will be procured and that my employment may be disqualified based on the results. Because this position involves interactions with vulnerable women and children,					
convicted sex offenders will not be considered and should not apply.					
In the event I am employed, I understand that false or misleading information given in my application or interviews					
may result in discharge.					
I certify that my answers are true and complete. I authorize inquiries of my employment, educational history or other related matters as may be necessary for an employment decision. I hereby release employers, schools or persons from					
all liability in responding to inquires in connection with my application.					
Signature	/ »pp	Date			

Pregnancy Aid of Snohomish County is an Equal Opportunity Employer

We do not discriminate on the basis of race, color, gender, age, national origin, disability, religious beliefs or sexual orientation.