



TROT
Therapeutic Riding Of Tri-Cities

JOB APPLICATION

Position: _____

Date: ___/___/___

First Name: _____ **MI** _____ **Last Name:** _____

Residence:

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

Employer: _____

Primary Service(s) and Area/Population Served: _____

Name: _____ **Title:** _____

Address: _____ **City:** _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Email:** _____

Preferred Method of Contact: Work Residence

Please list previous jobs, boards and committees that you served on (i.e. business, civic, community, fraternal, political, professional, recreational, religious, social):

Organization	Role/Title	Dates of Service
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever worked for a non-profit organization before? YES NO If YES, where and when?

Skills, experience and interests: (Please check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Administration, Management | <input type="checkbox"/> Personnel, Human Resources |
| <input type="checkbox"/> Community Service | <input type="checkbox"/> Policy Development |
| <input type="checkbox"/> Education, Instruction | <input type="checkbox"/> Program Evaluation |
| <input type="checkbox"/> Finance, Accounting | <input type="checkbox"/> Public Relations, Communications |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Grant Writing | Other: _____ |
| <input type="checkbox"/> Non-Profit Experience | Other: _____ |
| <input type="checkbox"/> Outreach, Advocacy | Other: _____ |

Professional References:

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

THANK YOU FOR APPLYING!

Please return the completed application:

- Mail: PO Box 5108, Pasco, WA 99302
- Email: info@trot3cities.org