



## Seattle Institute for Biomedical and Clinical Research

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### EMPLOYMENT APPLICATION DISCLAIMER

If I am hired by the Seattle Institute for Biomedical and Clinical Research, I agree that I may resign and that my employment and compensation may be terminated at any time, with or without notice, with or without cause, at the option of either the Institute or myself. I further understand that my employment relationship will be "at will," and that I am not being hired for any specified period of time. I further understand that no supervisor or representative of the Institute other than the Executive Director or President in writing signed by him or her, has any authority to enter into any other agreement for employment or to make any agreement contrary to the foregoing.

\_\_\_\_\_  
(signed name)

\_\_\_\_\_  
(printed name)

\_\_\_\_\_  
(date)