

Application for Employment

We are an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis including race, color, age, sex, religion, handicap or national origin, and we operate a drug free workplace.

PERSONAL INFORMATION

DATE _____

NAME _____

ADDRESS _____

Phone: _____ Email: _____

Referred by _____ Are you 18 years of age or older ___ YES ___ NO
Can you provide proof of age? ___ YES ___ NO

Position desired (1) _____
and salary (2) _____
(Be specific)

What days / hours are you available to work? What days are you not available?
Mon _____ Fri _____
Tues _____ Sat _____
Wed _____ Sun _____
Thurs _____

Are you employed now? ___ YES ___ NO If so, may we inquire of your present employer? _____

Tell us about your education. Please indicate names of all schools and years attended. Graduate?

Tell us where you have worked previously, dates you were employed, your salary when leaving, and why you worked where you did, and why you left. Be specific (feel free to use back of application. **If this information is excluded, we will not consider your application.**

Do you smoke? ____ YES ____ NO // Can you read at a 6th grade level? ____ YES ____ NO

Is there any reason why you could not be bonded? ____ YES ____ NO

Is there any reason you could not perform the physical requirement of the job? ____ YES ____ NO

Describe your use of drugs and alcohol.

Do you have health issues or high anxiety/stress that we should know about, you could be working with food products, etc. _____ YES _____ NO

Please provide three references, (at least two business) include address and phone numbers.

- 1) _____
- 2) _____
- 3) _____

Why do you want to work for our company? Why would you be a good choice for this position?

Authorization

I certify that the facts contained in this application (and accompanying resume, if any) are true and complete to the best of my knowledge. I understand that any false statement, omission, or misrepresentation on this application is sufficient cause for refusal to hire, or dismissal if I have been employed, no matter when discovered by the Company.

I understand that any employment is conditioned on a background check. I authorize the Company to thoroughly investigate all statements contained in my application or resume, and I authorize my former employers and references to disclose information regarding my former employment, character, and general reputation to the Company, without giving me prior notice of such disclosure. In addition, I release the Company, any former employers and all references listed above from any and all claims, demands, or liabilities arising out of or related to such investigation or disclosure.

I understand and agree that nothing contained in this application, or conveyed during any interview, is intended to create an employment contract. I further understand and agree that if I am hired, my employment will be "at will" and without fixed term, and may be terminated at any time, with or without cause and without prior notice, at the option of either myself or the company. No promises regarding employment have been made to me, and I understand that no such promise or guarantee is binding upon the Company unless made in writing.

If I am offered employment I agree to submit to a medical examination and drug test before starting work, if required. If employed, I also agree to submit to a medical examination or drug test at any time deemed appropriate by the Company and as permitted by law. I consent to such examinations and tests, and I request that the examining doctor disclose to the Company the results of the examination, which results shall remain confidential and segregated from my personnel file. I understand that my employment or continued employment, to the extent permitted by law, is contingent upon satisfactory medical examinations and drug test, and if I am hired, a condition of my employment will be that I abide by the Company's Drug and Alcohol Policy.

I understand that filling out this form does not indicate there is a position open and does not obligate the Company to hire. If hired, I agree to abide by all company work rules, policies and procedures. The Company retains the right to review its policies or procedures, in whole or in part, at any time.

If you are to be hired by the company, you will be required to attest to your identify and employment eligibility, and to present documents confirming your identity and employment eligibility. You cannot be hired if you cannot comply with these requirements. You also will be required to obtain within 30 days of employment, the Oregon State Food Handlers Certificate.

DATE _____ Signature _____

Consent for Drug & Alcohol Screen Testing

Name _____

DATE: _____

I, _____, freely give my consent for a drug and/or alcohol test. I have been fully informed of the reason for this urine test and I understand that the results will be forwarded to my supervisor or future supervisor.

If the test results are positive, I will be given the opportunity to explain the results before any action is taken.

Signature: _____

DATE: _____