

# APPLICATION FOR EMPLOYMENT



## CUSTOM APPLE PACKERS, INC.

P.O. Box 4640  
Wenatchee, Washington 98807  
Office (509) 663-2788 Fax (509) 662-0612

### GENERAL INFORMATION

Name \_\_\_\_\_ Date \_\_\_\_\_  
Last First Middle Social Security Number \_\_\_\_\_

Mailing Address \_\_\_\_\_  
Street/PO Box City State Zip Code

Phone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Home  Message (If under 18)

Position Desired \_\_\_\_\_ Date Available \_\_\_\_\_

Location Desired:  Wenatchee  Quincy

Available:  Full-Time  Part-Time  Nights  Weekends  Apples  Cherries (**Wenatchee Only**)

### BACKGROUND INFORMATION

Have you been convicted of a crime in the past 10 years? \_\_\_\_ Yes \_\_\_\_ No

If yes, please describe: \_\_\_\_\_

Are you currently employed? \_\_\_\_\_ Have you ever been employed by this company before? \_\_\_\_\_

Are you legally authorized to work in the U.S.?  Yes  No

EDUCATION	Name/Location of School	Date Graduated	Subjects Studied
High School			
College			
Trade or Business School			

**PREVIOUS EMPLOYMENT**

Please provide accurate and complete full-time and part-time employment history, starting with your present or most recent employer.

1	Company Name _____ Address _____ Name of Supervisor _____ Job Title _____	Phone Number _____ Dates Employed (Month & Year) _____ Hourly Pay _____ Reason for Leaving _____
2	Company Name _____ Address _____ Name of Supervisor _____ Job Title _____	Phone Number _____ Dates Employed (Month & Year) _____ Hourly Pay _____ Reason for Leaving _____
3	Company Name _____ Address _____ Name of Supervisor _____ Job Title _____	Phone Number _____ Dates Employed (Month & Year) _____ Hourly Pay _____ Reason for Leaving _____
4	Other Skills or Training _____ _____	

**EMERGENCY CONTACT**

In case of emergency notify \_\_\_\_\_  
Name Phone Number

## **INFORMATION FOR THE APPLICANT**

The law requires that you provide acceptable documentation evidencing your identity and authorization for employment in the United States.

Custom Apple Packers is an Equal Opportunity Employer and does not discriminate in hiring or employment in accordance with the requirements of all applicable local, state and federal laws, on the basis of race, color, creed, sex, national origin, age, marital status, sexual orientation, veteran status or physical or mental disability unrelated to job requirements.

You are not required to disclose information relating to any physical or mental condition. If you believe you have a physical or mental condition that prevents you from performing the essential functions of the job to which you are assigned, you should direct a request for accommodation to your supervisor and/or Human Resources. Custom Apple Packers will strive to make a reasonable accommodation, unless doing so will impose an undue hardship to Custom Apple Packer's conduct of business or is contrary to law.

### **PRE-EMPLOYMENT STATEMENT AND RELEASE BY APPLICANT**

I understand that if I am hired my employment with Custom Apple Packers will be at will, which means that either I or Custom Apple may terminate the employment relationship at any time with or without cause and/or with or without notice.

I agree to submit to drug testing as a condition of my employment and continued employment with Custom Apple Packers. I understand that my refusal to submit to drug testing and/or positive test results may result in disciplinary action, up to and including termination. I acknowledge that it may be necessary for Custom Apple Packers to release the results of any drug test during my employment or after my employment ends, and I consent to such disclosure.

I certify that all of the information supplied in this application and/or contained in any attached resume or supporting documentation is true and correct. I understand that Custom Apple Packers will rely on this information in making its employment decision, and that any false, incomplete or misleading information provided by me will result in rejection of my application, or, if I am hired, termination of my employment at any point in the future.

I authorize all educational institutions which I have attended, all branches of the U.S. military service, all of my current and/or former employers, all court systems, and all of their representatives to furnish to Custom Apple Packers information concerning my education, military service, employment history, and/or criminal conviction(s). I agree to release and/or hold harmless any institution, service, employer, bureau, court, and/or their representatives, including Custom Apple Packers, from any and all claims that I may have and/or that may arise against any such entity in relation to the release of such information.

I certify that I have read and understand the above statements.

Signature \_\_\_\_\_ Date \_\_\_\_\_

THIS APPLICATION IS VALID FOR 60 DAYS. AFTER 60 DAYS, A NEW APPLICATION MAY BE REQUIRED.

FOR COMPANY USE ONLY

Notes

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1-9 \_\_\_\_\_ W-4 \_\_\_\_\_ Handbook \_\_\_\_\_ MWP \_\_\_\_\_

Date Hired \_\_\_\_\_

Position \_\_\_\_\_

For Department \_\_\_\_\_

Will Report \_\_\_\_\_

Salary/Wage \_\_\_\_\_

Drug Test \_\_\_\_\_

Status \_\_\_\_\_