

APPLICATION FOR EMPLOYMENT

Central Oregon Collective is an equal opportunity employer and maintains a consistent policy prohibiting unlawful discrimination in employment. The company's policy is not to discriminate against any applicant for employment because of age, religion, color, national origin or ancestry, marital status, disability, or any other protected status with respect to hiring, promotion, demotion, transfer recruitment, terminations salary level or other forms of compensation or any other term or condition of employment. Our organization complies with the fullest extent with all applicable state, federal and local laws governing equal employment opportunity and discrimination in the workplace. Central Oregon Collective will make every effort to meet a request for disability accommodation. If you require accommodation to participate in our application process, please contact our office.

This company is an at-will employer as allowed by applicable state law. This means that regardless of any provision in this application, if hired, the company may terminate the employment relationship at any time, for any reason, with or without cause or notice.

Please answer all questions fully and accurately. Resumes are not a substitute for a completed application. No action can be taken on this application until all questions are completed.

INSTRUCTIONS

PLEASE PRINT

Position applied for _____ Today's date _____

Employment status sought: Full-time Part-time Weekends Temporary

Shifts willing to work Days Nights (NOC) are you willing to work overtime? Yes No

Are you able to travel if required? Yes No Can you work a 12 shift? Yes No

Have you previously applied for employment or worked for this company? Yes No

If yes, when and where did you work or apply? _____

When are you available for employment?

Are you at least 18 years of age or older? Yes No

PERSONAL DATA

Last Name

First Name

Middle Initial

Present Street Address

Mailing

City

State

Zip Code

Mailing Address If Different

City

State

Zip Code

Cell Number	Home Number
E-Mail Address	

**** Please be aware that some positions require Criminal History background and driving record checks ****

Are you eligible to work in the United States? Yes No

Do you have any commitments or agreements with another employer which might affect your employment here? Yes No

If yes, please explain:

EDUCATION

Name, Address and Location of School	Years Completed	Graduated? (Y or N)
High School:		
College or University:		
College Major:		
Degree:		

SPECIALIZED TRAINING

Please describe your interest in working for us and the job related experiences, skills, qualifications, and aptitudes that you feel qualify you for the position for which you are applying. You may wish to include vocational training, seminars or workshops you have attended, civic and community activities, professional societies in which you participate, licenses, certificates, publications, honors, professional designations or achievements, and other specialized training or skills.

SKILLS, KNOWLEDGE and CERTIFICATIONS

Please check all skills or proficiencies that apply to you.

_____ Customer Service _____ Ten-key _____ Excel _____ Outlook _____ Word

_____ Keyboarding (Speed: _____ WPM) _____ Cash Handling

_____ CPR / First Aid Card Expiration Date _____

_____ Driver's License Expiration Date _____

_____ Other Certifications: Explain _____

Foreign Language _____ Beginning _____ Intermediate _____ Advanced

Foreign Language _____ Beginning _____ Intermediate _____ Advanced

WORK HISTORY

List names of employers in consecutive order starting with present to last employer. If self-employed, give firm name and supply business references. If you worked in any of the positions under another name, please give name(s). PLEASE LIST BOTH MONTH AND YEAR FOR DATES EMPLOYED.

May we contact your present employer? Yes No

Employer	Supervisor	Hourly Salary Rate Start: End:
Address		Phone
Dates Employed From: To:	Position Held	Reason for Leaving

Duties:

Employer	Supervisor	Hourly Salary Rate Start: End:
Address		Phone
Dates Employed From: To:	Position Held	Reason for Leaving

Duties:

Employer	Supervisor	Hourly Salary Rate Start: End:
Address		Phone
Dates Employed From: To:	Position Held	Reason for Leaving

Duties:

Employer	Supervisor	Salary Start: End:
Address		Phone
Dates Employed From: To:	Position Held	Reason for Leaving

Duties:

Have you ever been dismissed by an employer? Yes <input type="checkbox"/> No <input type="checkbox"/>	If yes, please explain:
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REFERENCES

Give three references, not already listed in this application and not related to you.

Name Yrs. Known	Address	Occupation	Phone

Affidavit / Application Certification

I certify that, to the best of my knowledge, the information contained in this application is true and complete. I understand that my employment may be denied or terminated if I provide false, misleading, or incomplete information during the hiring process or my employment.

I understand that, if I am hired, I must produce applicable documents showing that I am lawfully authorized to work in the United States, in accordance with the Immigration Reform and Control Act of 1986, as amended.

I authorize Central Oregon Collective to contact any of my past employers and/or schools, and authorize my past employers and/or schools to furnish any information concerning my previous employment and/or education. I release Central Oregon Collective and all employers and schools from liability for any damages that may result from furnishing information to Central Oregon Collective. Additionally, I authorize Central Oregon Collective to obtain bond ability reports to determine employment eligibility.

I agree to submit to any post-offer, pre-employment testing or background checks, as required by Central Oregon Collective.

In the event of my employment, I agree to conform to the policies and procedures of Central Oregon Collective as set forth now or hereafter in any of their policy and/or procedure manuals or other communications.

I understand that this application in no way represents a contract of employment between me and Central Oregon Collective. I also understand that, if I am hired, the employment relationship will be at-will, which means that it may be terminated by Central Oregon Collective or me at any time, with or without cause, and with or without notice.

This application will be considered active for a maximum of ninety (90) days. If you wish to be considered for employment after that time, you must reapply.

I acknowledge and certify that I have read and understand the above statements and attest the information provided on the application is true, accurate, and complete.

Applicant's Signature

____ / ____ / ____
Date