

## CASCADE CENTRAL CONSTRUCTION, LLC PO BOX 119 WENATCHEE, WA 98807-0119

## **Employment Application**

Applicant Information								
Full Name:	lame:		Date:					
	Last	First			М.І.			
Address:	Street Address					Apartment/Unit	#	
	City				State	ZIP Code		
Phone:	,		Email					
Date Availal	ole:	Social Security No.:			Desire	d Salary: <u>\$</u>		
Position App	olied for:							
Are you a ci	tizen of the United Sta	YES NO Ltes?	If no, a	re you a	authorized to w	YES vork in the U.S.?	NO	
Have you ever worked for this company?  YES NO  If yes, when?								
Applicants will be subject to completing a background check.								
		Educ	ation					
High Schoo	l:	Address:						
From:	To:	Did you graduate?	YES	NO	Diploma:			
College:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			
Other:		Address:						
From:	To:	Did you graduate?	YES	NO	Degree:			

	Refere	nces		
Please list three profe	essional references.			
Full Name:			Relationship:	
Campany			Phone:	
Address:				
			Relationship:	
			Phone:	
Address:				
Full Name:			Relationship:	
Company			Phone:	
Addroso:			T Hono.	
	Previous Em			
Campanin			Dhana	
A status a sec			Phone:	
Address:			Supervisor:	
Job Title:	Starting Sal	Ending Salary:\$		
Responsibilities:				
From:	To:	Reason for Leavin	g:	
May we contact your p	previous supervisor for a reference?	YES NO		
Company:			Phone:	
Address:			Supervisor:	
Job Title:	Starting Sal	lary: <b>\$</b>	Ending Salary: <b>\$</b>	
Responsibilities:				
From:			g:	
		YES NO		
May we contact your p	previous supervisor for a reference?			
Company:			Phone:	
Addroso:			Cupanicar	
Job Title:	Starting Sal	Ending Salary: <b>\$</b>		

Responsibilities:						
			Leaving:			
May we contact your previous supervis		YES	NO			
	Military S	Service				
Branch:			From:	To:		
Rank at Discharge:		Type of D	ischarge:			
If other than honorable, explain:						
Disclaimer and Signature						
I certify that my answers are true and complete to the best of my knowledge.						
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.						
I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision.						
I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization.						
In the event of employment, I unders interview(s) may result in discharge. the employer:						
Signature:				Date:		