



Application for Employment

Please print or type legibly. Read and answer all questions carefully and completely. You may attach your resume, however all sections of the application **MUST** be completed. **ONLY FULLY COMPLETED, SIGNED AND DATED APPLICATIONS will be considered.** This application is valid for thirty (30) days from date signed. To reapply after thirty (30) days, you must complete and submit a new application.

Personal Information

Name (First, Last):		Today's Date:	
Email:	Check here if no email <input type="checkbox"/>	Cell #:	Home #:
Street Address:		City, State, Zip:	
Do you have any relatives or friends who work for this Company? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, list name(s) and location:			
Have you ever applied for employment at PNW Metal Recycling, RS Davis Recycling or Rivergate Scrap Metals? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, Month:	Year: Location:
Have you ever been employed by PNW Metal Recycling, RS Davis or Rivergate Scrap Metals? <input type="checkbox"/> Yes <input type="checkbox"/> No		If Yes, give locations, dates of employment, last supervisor and reason for leaving:	
Are you legally authorized to work in the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		<i>Upon hire, all persons must verify eligibility to be employed in the United States. This Company participates in E-Verify</i>	
How did you learn of our organization? <input type="checkbox"/> Employee Referral (name) _____ <input type="checkbox"/> Company's Website			
<input type="checkbox"/> Job board (list) _____ <input type="checkbox"/> Through Staffing Agency _____ Other _____			

Job or Position Interest

Position(s) applying for: (be specific)	Monthly/Hourly Salary desired:	Are you under 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
Will you work overtime? <input type="checkbox"/> Yes <input type="checkbox"/> No	Date available to begin work:	Do you Prefer: <input type="checkbox"/> Full-time <input type="checkbox"/> Part-Time
Will you work weekends? <input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Seasonal (specify):
Are you able and willing to travel: Location to location (day)? <input type="checkbox"/> Yes <input type="checkbox"/> No Overnight? <input type="checkbox"/> Yes <input type="checkbox"/> No	Do you have any commitments to another employer that might affect your employment with us? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, specify _____	

Essential Job Functions

Are you able to perform the essential functions of the position(s) for which you have applied? <input type="checkbox"/> Yes <input type="checkbox"/> No	If No, please explain or request a job description for clarification of essential functions of the position(s).
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Education

Name(s) used on school records (if different from above):				
Schools	Name of School	City, State	Did You Graduate?	Degree or Highest Grade Completed
High School			<input type="checkbox"/> Yes <input type="checkbox"/> No	
College (s)			<input type="checkbox"/> Yes <input type="checkbox"/> No	
Certifications Licensures Other			<input type="checkbox"/> Yes <input type="checkbox"/> No	

Are you currently enrolled or attending school? Yes No If yes, what school and when? _____
 % Completed _____ When do you anticipate completion? _____ Will you need schedule accommodations now or in the future to complete school? Yes No Possibly Specify Needs: _____

Other Special Training or Skills

(List other skills here such as languages spoken, computer, equipment or machine operation, etc.)

Employment

Give an accurate, complete full-time and part-time employment record. List current job or, if unemployed, most recent job first.

DO NOT omit any jobs. If more space is needed, continue providing your complete employment history on an additional page.

Company Name:	Position Held:	Date of Employment (month/year)	
		From:	To:
Address:	City, State, Zip:	Telephone:	
Name and Title of Immediate Supervisor:	Supervisor Phone:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Responsibilities:

Company Name:	Position Held:	Date of Employment (month/year)	
		From:	To:
Address:	City, State, Zip:	Telephone:	
Name and Title of Immediate Supervisor:	Supervisor Phone:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Responsibilities:

Company Name:	Position Held:	Date of Employment (month/year)	
		From:	To:
Address:	City, State, Zip:	Telephone:	
Name and Title of Immediate Supervisor:	Supervisor Phone:	Reason for Leaving:	May we contact this employer? <input type="checkbox"/> Yes <input type="checkbox"/> No

Responsibilities:

References

List three professional references that are familiar with your work performance. **Do NOT list family or friends.**

Name	Relationship	Email Address	Phone
1)			
2)			
3)			

Applicant's Certification, Agreement and Authorization

By signing below, I certify that the statements indicated on this Application and any resume or supplementary materials provided are true and complete to the best of my knowledge and I understand that falsification or omission of any information that PNW Metal Recycling ("PNW") considers material will result in refusal to hire or termination of my employment, if I am hired. Further, I authorize PNW and their agents to conduct a thorough investigation of my past employment, education, and activities, and I agree to fully cooperate in such investigation. I understand and hereby authorize all persons, schools, companies, employers and/or their representatives to furnish verification to PNW, its representatives or agents any and all information set forth in this Application and any resume or supplementary materials. I agree to hold harmless and to release from all liability all said persons, schools, companies, employers and/or their representatives from any and all claims that may have or which may arise, against any and/or all of them, including the Employer, as a result of them furnishing information to PNW. I agree to take any physical examination and pre-employment test, including drug screen test. All such tests will be administered in compliance with the Americans with Disabilities Act. I authorize PNW, should they employ me, to release employment references if my employment becomes terminated for any reason. I also authorize PNW to conduct credit, police, criminal and driving record inquiries or any other employment related inquiries in compliance with the provisions of the Fair Credit Reporting Act (FCRA), 15, USC Section 1681, et. seq. I understand that the decision to hire me and if hired, my continued employment will be subject to the results of these inquiries.

This Application for Employment is not a contract and cannot create a contract. If employed by PNW, I agree to abide by its rules and regulations as they currently exist or are subsequently modified. I understand that if hired, my employment, compensation and benefits would be "at-will" and could be terminated at any time by either party, with or without cause, and with or without notice. Further, I understand and acknowledge that there can be no change in this "at-will" relationship unless it is in writing, specifically addressing the "at-will" relationship, and it is signed by the President of the Company. No supervisor, representative, agent or other employee of PNW has now or has had in the past or in the future, the authority to enter into any agreement of employment or to make any agreement which is contrary to or in modification of these terms, nor can any policies or practices of PNW either written or oral, modify the terms.

PNW Metal Recycling is an Equal Opportunity Employer. All prospective employees will receive consideration without regard to race, color, age, religion, national origin, gender, marital, sexual orientation, marital status, veteran status, disability or other protected status/activity. You must advise if accommodations are necessary for you to complete this selection process.

Applicant's Signature and Date

By typing below, you are signing this application

Signature: _____ Date: _____